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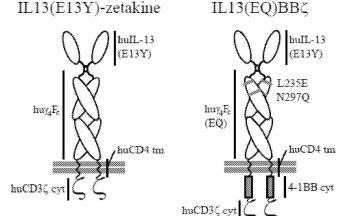
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### (54) COSTIMULATORY CHIMERIC ANTIGEN RECEPTOR T CELLS TARGETING IL13 R ALPHA 2

(57) Chimeric transmembrane immunoreceptors (CAR) which include an extracellular domain that includes IL-13 or a variant thereof that binds inter-

leukin-13R $\alpha$ 2 (IL13R $\alpha$ 2), a transmembrane region, a costimulatory domain and an intracellular signaling domain are described.

### FIGURE 1



### Description

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#### **BACKGROUND**

**[0001]** Tumor-specific T cell based immunotherapies, including therapies employing engineered T cells, have been investigated for anti-tumor treatment. In some cases the T cells used in such therapies do not remain active *in vivo* for a long enough period. In some cases, the tumor-specificity of the T cells is relatively low. Therefore, there is a need in the art for tumor-specific cancer therapies with longer term anti-tumor functioning.

[0002] Malignant gliomas (MG), which include anaplastic astrocytoma (AA-grade III) and glioblastoma (GBM-grade IV), have an incidence rate of approximately 20,000 new cases diagnosed annually in the United States. According to the American Brain Tumor Association total prevalence of individuals living with a malignant brain tumor, based on United States 2010 census data, is roughly 140,000 persons. Although MG is a rare disease, it is highly aggressive and heterogeneous with respect to its malignant behavior and nearly uniformly lethal. Current standard-of-care therapies for high-grade MG yield only short term benefits, and these brain tumors are virtually incurable. Indeed, even with modern surgical and radiotherapeutic techniques, which often exacerbate the already severe morbidities imposed by location in the central nervous system (CNS), the 5-year survival rates are quite low. Furthermore, for the majority of patients who relapse with disease, there are few therapeutic options. Thus, there is a significant need for more effective therapies, particularly for those patients that have recurred/progressed following frontline therapies, and participation of this patient population in clinical trials is warranted.

**[0003]** Adoptive T cell therapy (ACT) utilizing chimeric antigen receptor (CAR) engineered T cells may provide a safe and effective way to reduce recurrence rates of MG, since CAR T cells can be engineered to specifically recognize antigenically-distinct tumor populations (Cartellieri et al. 2010 J Biomed Biotechnol 2010:956304; Ahmed et al. 2010 Clin Cancer Res 16:474; Sampson et al. 2014 Clin Cancer Res 20:972; Brown et al. 2013 Clin Cancer Res 2012 18:2199; Chow et al. 2013 Mol Ther 21:629), and T cells can migrate through the brain parenchyma to target and kill infiltrative malignant cells (Hong et al. 2010 Clin Cancer Res 16:4892; Brown et al. 2007 J Immunol 179:3332; Hong et al. 2010 Clin Cancer Res 16:4892; Yaghoubi 2009 Nat Clin PRact Oncol 6:53). Preclinical studies have demonstrated that IL13R $\alpha$ 2-targeting CAR+ T cells exhibit potent major histocompatibility complex (MHC)-independent, IL13R $\alpha$ 2-specific cytolytic activity against both stem-like and differentiated glioma cells, and induce regression of established glioma xenografts *in vivo* (Kahlon et al. 2004 Cancer Res 64:9160; Brown et al. 2012 Clin Cancer Res 18:2199).

#### **SUMMARY**

[0004] Described herein are chimeric transmembrane immunoreceptors (chimeric antigen receptors or "CARs") which comprise an extracellular domain, a transmembrane region and an intracellular signaling domain. The extracellular domain is made up of an IL-13 ligand that binds interleukin- $13R\alpha 2$  (IL13R $\alpha 2$ ) and, optionally, a spacer, comprising, for example a portion human Fc domain. The transmembrane portion includes a CD4 transmembrane domain, a CD8 transmembrane domain, a CD28 transmembrane domain, a CD3 transmembrane domain or a 4IBB transmembrane domain. The intracellular signaling domain includes the signaling domain from the zeta chain of the human CD3 complex (CD3ζ) and one or more costimulatory domains, e.g., a 4-1BB costimulatory domain. The extracellular domain enables the CAR, when expressed on the surface of a T cell, to direct T cell activity to those cells expressing IL13R $\alpha$ 2, a receptor expressed on the surface of tumor cells, including glioma. Importantly, the IL13R $\alpha$ 2 binding portion of the CAR includes an amino acid modification, such as an E13Y mutation, that increases binding specificity. The inclusion of a costimulatory domain, such as the 4-1BB (CD137) costimulatory domain in series with CD3ζ in the intracellular region enables the T cell to receive co-stimulatory signals. T cells, for example, patient-specific, autologous T cells can be engineered to express the CARs described herein and the engineered cells can be expanded and used in ACT. Various T cell subsets can be used. In addition, the CAR can be expressed in other immune cells such as NK cells. Where a patient is treated with an immune cell expressing a CAR described herein the cell can be an autologous or allogenic T cell. In some cases the cells used are CD4+ and CD8+ central memory T cells (T<sub>CM</sub>), which are CD45RO+CD62L+, and the use of such cells can improve long-term persistence of the cells after adoptive transfer compared to the use of other types of patientspecific T cells.

**[0005]** Described herein is a nucleic acid molecule encoding a chimeric antigen receptor (CAR)r, wherein the chimeric antigen receptor comprises: human IL-13 or a variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications; a transmembrane domain selected from: a CD4 transmembrane domain or variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications, a CD8 transmembrane domain or variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications, and a CD3 $\zeta$  transmembrane domain or a variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications; a costimulatory domain; and CD3 $\zeta$  signaling domain of a variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications.

[0006] In various embodiments the costimulatory domain is selected from the group consisting of: a CD28 costimulatory

domain or a variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications, a 4-IBB costimulatory domain or a variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications and an OX40 costimulatory domain or a variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications. In certain embodiments, a 4IBB costimulatory domain or a variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications in present.

[0007] Additional embodiment the CAR comprises: a variant of a human IL13 having 1-10 amino acid modification that increase binding specificity for IL13Rα2 versus IL13Rα1; the human IL-13 or variant thereof is an IL-13 variant comprising the amino acid sequence of SEQ ID NO:3 with 1 to 5 amino acid modifications, provided that the amino acid at position 11 of SEQ ID NO:3 other than E; two different costimulatory domains selected from the group consisting of: a CD28 costimulatory domain or a variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications, a 4IBB costimulatory domain or a variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications and an OX40 costimulatory domain or a variant thereof having 1-10 (e.g., 1 or 2) amino acid modifications; two different costimulatory domains selected from the group consisting of: a CD28 costimulatory domain or a variant thereof having 1-2 amino acid modifications, a 4IBB costimulatory domain or a variant thereof having 1-2 amino acid modifications and an OX40 costimulatory domain or a variant thereof having 1-2 amino acid modifications; human IL-13 or a variant thereof having 1-2 amino acid modifications; a transmembrane domain selected from: a CD4 transmembrane domain or variant thereof having 1-2 amino acid modifications, a CD8 transmembrane domain or variant thereof having 1-2 amino acid modifications, a CD28 transmembrane domain or a variant thereof having 1-2 amino acid modifications, and a CD3ζ transmembrane domain or a variant thereof having 1-2 amino acid modifications; a costimulatory domain; and CD3ζ signaling domain of a variant thereof having 1-2 amino acid modifications; a spacer region located between the IL-13 or variant thereof and the transmembrane domain (e.g., the spacer region comprises an amino acid sequence selected from the group consisting of SEQ ID NO: 4, 14-20, 50 and 52); the spacer comprises an IgG hinge region; the spacer region comprises 10-150 amino acids; the 4-1BB signaling domain comprises the amino acid sequence of SEQ ID NO:6; the CD3ζ signaling domain comprises the amino acid sequence of SEQ ID NO:7; and a linker of 3 to 15 amino acids that is located between the costimulatory domain and the CD3 ζ signaling domain or variant thereof. In certain embodiments where there are two costimulatory domains, one is an 4-IBB costimulatory domain and the other a costimulatory domain selected from: CD28 and CD28gg [0008] In some embodiments: nucleic acid molecule expresses a polypeptide comprising an amino acid sequence selected from SEQ ID NOs: 10, 31-48 and 52; the chimeric antigen receptor comprises a IL-13/IgG4/CD4t/41-BB region comprising the amino acid of SEQ ID NO:11 and a CD3 ζ signaling domain comprising the amino acid sequence of SEQ ID NO:7; and the chimeric antigen receptor comprises the amino acid sequence of SEQ ID NOs: 10, 31-48 and 52.

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**[0009]** Also disclosed is a population of human T cells transduced by a vector comprising an expression cassette encoding a chimeric antigen receptor, wherein chimeric antigen receptor comprises: human IL-13 or a variant thereof having 1-10 amino acid modifications; a transmembrane domain selected from: a CD4 transmembrane domain or variant thereof having 1-10 amino acid modifications, a CD8 transmembrane domain or variant thereof having 1-10 amino acid modifications, and a CD3 $\zeta$  transmembrane domain or a variant thereof having 1-10 amino acid modifications; a costimulatory domain; and CD3 $\zeta$  signaling domain of a variant thereof having 1-10 amino acid modifications. In various embodiments: the population of human T cells comrpise a vector expressing a chimeric antigen receptor comprising an amino acid sequence selected from SEQ ID NOs: 10, 31-48 and 52; the population of human T cells are comprises of central memory T cells (Tcm cells) (e.g., at least 20%, 30%, 40%, 50% 60%, 70%, 80% of the cells are Tcm cells; at least 15%, 20%, 25%, 30%, 35% of the Tcm cells are CD8+ cells).

[0010] Also described is a method of treating cancer in a patient comprising administering a population of autologous or allogeneic human T cells (e.g., autologous or allogenic T cells comprising Tcm cells, e.g., at least 20%, 30%, 40%, 50% 60%, 70%, 80% of the cells are Tcm cells; at least 15%, 20%, 25%, 30%, 35% of the Tcm cells are CD4+ and at least 15%, 20%, 25%, 30%, 35% of the Tcm cells are CD8+ cells) transduced by a vector comprising an expression cassette encoding a chimeric antigen receptor, wherein chimeric antigen receptor comprises an amino acid sequence selected from SEQ ID NOs: 10, 31-48 and 52. In various embodiments: the population of human T cells comprise central memory T cells; the cancer is glioblastoma; and the transduced human T cells where prepared by a method comprising obtaining T cells from the patient, treating the T cells to isolate central memory T cells, and transducing at least a portion of the central memory cells to with a viral vector comprising an expression cassette encoding a chimeric antigen receptor, wherein chimeric antigen receptor comprises an amino acid sequence selected from SEQ ID NOs: 10, 31-48 and 52.

[0011] Also described is: a nucleic acid molecule encoding an polypeptide comprising an amino acid sequence that is at least 95% identical to an amino acid sequence selected from SEQ ID NO:10 and SEQ ID NOs: 10, 31-48 and 52; a nucleic acid molecule encoding an polypeptide comprising an amino acid sequence that is identical to an amino acid sequence selected from SEQ ID NO: 10, 31-48 and 52 except for the presence of no more than 5 amino acid substitutions, deletions or insertions; a nucleic acid molecule encoding an polypeptide comprising an amino acid sequence that is identical to an amino acid sequence selected from SEQ ID NO:10 and SEQ ID NOs: 10, 31-48 and 52 except for the presence of no more than 5 amino acid substitutions; and a nucleic acid molecule encoding an polypeptide comprising an amino acid sequence that is identical to an amino acid sequence selected from SEQ ID NO:10 and SEQ ID NO:

10, 31-48 and 52 except for the presence of no more than 2 amino acid substitutions.

**[0012]** Certain CAR described herein, for example, the IL13(EQ)BB $\zeta$  CAR and the IL13(EQ)CD28- BB $\zeta$  CAR, have certain beneficial characteristics compared to certain other IL13-targeted CAR. For example, they have improved selectivity for IL13R $\alpha$ , elicit lower Th2 cytokine production, particularly lower IL13 production.

**[0013]** T cells expressing a CAR targeting IL13R $\alpha$ 2 can be useful in treatment of cancers such as glioblastoma, as well as other cancer that expresses IL13R $\alpha$ 2 which include but are not limited to medulloblastoma, breast cancer, head and neck cancer, kidney cancer, ovarian cancer and Kaposi's sarcoma. Thus, this disclosure includes methods for treating cancer using T cells expressing a CAR described herein.

**[0014]** This disclosure also nucleic acid molecules that encode any of the CARs described herein (e.g., vectors that include a nucleic acid sequence encoding one of the CARs) and isolated T lymphocytes that express any of the CARs described herein.

**[0015]** The CAR described herein can include a spacer region located between the IL13 domain and the transmembrane domain. A variety of different spacers can be used. Some of them include at least portion of a human Fc region, for example a hinge portion of a human Fc region or a CH3 domain or variants thereof. Table 1 below provides various spacers that can be used in the CARs described herein.

**Table 1: Examples of Spacers** 

Table 1. Examples of Spacers										
Name	Length	Sequence								
a3	3 aa	AAA								
linker	10 aa	GGGSSGGSG (SEQ ID NO:14)								
IgG4 hinge (S→P) (S228P)	12 aa	ESKYGPPCPPCP (SEQ ID NO:15)								
IgG4 hinge	12 aa	ESKYGPPCPSCP (SEQ ID NO:52)								
IgG4 hinge + linker	22 aa	ESKYGPPCPPCPGGGSSGGGSG (SEQ ID NO:16)								
CD28 hinge	39 aa	IEVMYPPPYLDNEKSNGTIIHVKGKHL CPSPLFPGPSKP (SEQ ID NO:17)								
CD8 hinge-48aa	48 aa	AKPTTTPAPRPPTPAPTIASQPLSLRPE ACRPAAGGAVHTRGLDFACD (SEQ ID NO:18)								
CD8 hinge-45aa	45aa	TTTPAPRPPTPAPTIASQPLSLRPEACR PAAGGAVHTRGLDFACD (SEQ ID NO:19)								
IgG4(HL-CH3)	129 aa	ESKYGPPCPPCPGGGSSGGGSGGQPR EPQVYTLPPSQEEMTKNQVSLTCLVK GFYPSDIAVEWESNGQPENNYKTTPP VLDSDGSFFLYSRLTVDKSRWQEGNV FSCSVMHEALHNHYTQKSLSLSLGK (SEQ ID NO:20)								

(continued)

	Name	Length	Sequence
10	IgG4(L235E,N297Q)	229 aa	ESKYGPPCPSCPAPEFEGGPSVFLFPPK PKDTLMISRTPEVTCVVVDVSQEDPE VQFNWYVDGVEVHQAKTKPREEQFN STYRVVSVLTVLHQDWLNGKEYKCK VSNKGLPSSIEKTISKAKGQPREPQVY TLPPSQEEMTKNQVSLTCLVKGFYPS DIAVEWESNGQPENNYKTTPPVLDSD GSFFLYSRLTVDKSRWQEGNVFSCSV MHEALHNHYTQKSLSLSLGK (SEQ
15			ID NO:4)
20	IgG4(S228P, L235E,N297Q)	229 aa	ESKYGPPCPPCPAPEFEGGPSVFLFPPK PKDTLMISRTPEVTCVVVDVSQEDPE VQFNWYVDGVEVHQAKTKPREEQFN STYRVVSVLTVLHQDWLNGKEYKCK VSNKGLPSSIEKTISKAKGQPREPQVY TLPPSQEEMTKNQVSLTCLVKGFYPS DIAVEWESNGQPENNYKTTPPVLDSD GSFFLYSRLTVDKSRWQEGNVFSCSV MHEALHNHYTQKSLSLSLGK (SEQ ID NO:51)
30	IgG4(CH3)	107 aa	GQPREPQVYTLPPSQEEMTKNQVSLT CLVKGFYPSDIAVEWESNGQPENNYK TTPPVLDSDGSFFLYSRLTVDKSRWQ EGNVFSCSVMHEALHNHYTQKSLSLS
35			LGK (SEQ ID NO:50)

Some spacer regions include all or part of an immunoglobulin (e.g., IgG1, IgG2, IgG3, IgG4) hinge region, i.e., the sequence that falls between the CH1 and CH2 domains of an immunoglobulin, e.g., an IgG4 Fc hinge or a CD8 hinge. Some spacer regions include an immunoglobulin CH3 domain or both a CH3 domain and a CH2 domain. The immunoglobulin derived sequences can include one ore more amino acid modifications, for example, 1, 2, 3, 4 or 5 substitutions, e.g., substitutions that reduce off-target binding.

**[0016]** An "amino acid modification" refers to an amino acid substitution, insertion, and/or deletion in a protein or peptide sequence. An "amino acid substitution" or "substitution" refers to replacement of an amino acid at a particular position in a parent peptide or protein sequence with another amino acid. A substitution can be made to change an amino acid in the resulting protein in a non-conservative manner (i.e., by changing the codon from an amino acid belonging to a grouping of amino acids having a particular size or characteristic to an amino acid belonging to a grouping of amino acids having a particular size or characteristic to an amino acid belonging to a grouping of amino acids having a particular size or characteristic to an amino acid belonging to the same grouping). Such a conservative change generally leads to less change in the structure and function of the resulting protein. The following are examples of various groupings of amino acids: 1) Amino acids with nonpolar R groups: Alanine, Valine, Leucine, Isoleucine, Proline, Phenylalanine, Tryptophan, Methionine; 2) Amino acids with uncharged polar R groups: Glycine, Serine, Threonine, Cysteine, Tyrosine, Asparagine, Glutamine; 3) Amino acids with charged polar R groups (negatively charged at pH 6.0): Aspartic acid, Glutamic acid; 4) Basic amino acids (positively charged at pH 6.0): Lysine, Arginine, Histidine (at pH 6.0). Another grouping may be those amino acids with phenyl groups: Phenylalanine, Tryptophan, and Tyrosine.

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**[0017]** In certain embodiments, the spacer is derived from an IgG1, IgG2, IgG3, or IgG4 that includes one or more amino acid residues substituted with an amino acid residue different from that present in an unmodified spacer. The one or more substituted amino acid residues are selected from, but not limited to one or more amino acid residues at positions

220, 226, 228, 229, 230, 233, 234, 235, 234, 237, 238, 239, 243, 247, 267, 268, 280, 290, 292, 297, 298, 299, 300, 305, 309, 218, 326, 330, 331, 332, 333, 334, 336, 339, or a combination thereof. In this numbering scheme, described in greater detail below, the first amino acid in the IgG4(L235E,N297Q) spacer in Table 1 is 219 and the first amino acid in the IgG4(HL-CH3) spacer in Table 1 is 219 as is the first amino acid in the IgG hinge sequence and the IgG4 hinge linker (HL) sequence in Table 1

[0018] In some embodiments, the modified spacer is derived from an IgG1, IgG2, IgG3, or IgG4 that includes, but is not limited to, one or more of the following amino acid residue substitutions: C220S, C226S, S228P, C229S, P230S, E233P, V234A, L234V, L234F, L234A, L235A, L235E, G236A, G237A, P238S, S239D, F243L, P247I, S267E, H268Q, S280H, K290S, K290E, K290N, R292P, N297A, N297Q, S298A, S298G, S298D, S298V, T299A, Y300L, V305I, V309L, E318A, K326A, K326W, K326E, L328F, A330L, A330S, A331S, P331S, I332E, E333A, E333S, E333S, K334A, A339D, A339Q, P396L, or a combination thereof.

**[0019]** In certain embodiments, the modified spacer is derived from IgG4 region that includes one or more amino acid residues substituted with an amino acid residue different from that present in an unmodified region. The one or more substituted amino acid residues are selected from, but not limited to, one or more amino acid residues at positions 220, 226, 228, 229, 230, 233, 234, 235, 234, 237, 238, 239, 243, 247, 267, 268, 280, 290, 292, 297, 298, 299, 300, 305, 309, 218, 326, 330, 331, 332, 333, 334, 336, 339, or a combination thereof.

[0020] In some embodiments, the modified spacer is derived from an IgG4 region that includes, but is not limited to, one or more of the following amino acid residue substitutions: 220S, 226S, 228P, 229S, 230S, 233P, 234A, 234V, 234F, 234A, 235A, 235E, 236A, 237A, 238S, 239D, 243L, 247I, 267E, 268Q, 280H, 290S, 290E, 290N, 292P, 297A, 297Q, 298A, 298G, 298D, 298V, 299A, 300L, 305I, 309L, 318A, 326A, 326W, 326E, 328F, 330L, 330S, 331S, 331S, 332E, 333A, 333S, 334A, 339D, 339Q, 396L, or a combination thereof, wherein the amino acid in the unmodified spacer is substituted with the above identified amino acids at the indicated position.

[0021] For amino acid positions in immunoglobulin discussed herein, numbering is according to the EU index or EU numbering scheme (Kabat et al. 1991 Sequences of Proteins of Immunological Interest, 5th Ed., United States Public Health Service, National Institutes of Health, Bethesda, hereby entirely incorporated by reference). The EU index or EU index as in Kabat or EU numbering scheme refers to the numbering of the EU antibody (Edelman et al. 1969 Proc Natl Acad Sci USA 63:78-85).

**[0022]** A variety of transmembrane domains can be used in CAR directed against IL13Ra2. Table 2 includes examples of suitable transmembrane domains. Where a spacer domain is present, the transmembrane domain is located carboxy terminal to the spacer domain.

**Table 2: Examples of Transmembrane Domains** 

Name	Accession	Length	Sequence							
CD3z	J04132.1	21 aa	LCYLLDGILFIYGVILTALFL (SEQ ID NO:21)							
CD28	NM_ 006139	27aa	FWVLVVVGGVLACYSLLVTVAFIIFWV (SEQ ID NO:22)							
CD28(M)	NM_ 006139	28aa	MFWVLVVVGGVLACYSLLVTVAFIIFWV (SEQ ID NO:22)							
CD4	M35160	22aa	MALIVLGGVAGLLLFIGLGIFF (SEQ ID NO:5)							
CD8tm	NM_001768	21aa	IYIWAPLAGTCGVLLLSLVIT (SEQ ID NO:23)							
CD8tm2	NM_001768	23aa	IYIWAPLAGTCGVLLLSLVITLY (SEQ ID NO:24)							
CD8tm3	NM_001768	24aa	IYIWAPLAGTCGVLLLSLVITLYC (SEQ ID NO:25)							
41BB	NM_001561	27aa	IISFFLALTSTALLFLLFF LTLRFSVV (SEQ ID NO:26)							

Many of the CAR described herein include one or more (e.g., two) costimulatory domains. The costimulatory domain(s) are located between the transmembrane domain and the CD3 $\zeta$  signaling domain. Table 3 includes examples of suitable costimulatory domains together with the sequence of the CD3 $\zeta$  signaling domain.

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**Table 3: Examples of Costimulatory Domains** 

Name	Accession	Length	Sequence
CD3C	J04132.1	113 aa	RVKFSRSADAPAYQQGQNQLYNELNLGR REEYDVLDKRRGRDPEMGGKPRRKNPQ EGLYNELQKDKMAEAYSEIGMKGERRR GKGHDGLYQGLSTATKDTYDALHMQAL PPR
CD28	NM_ 006139	42aa	RSKRSRLLHSDYMNMTPRRPGPTRKHYQ PYAPPRDFAAYRS (SEQ ID NO: 27)
CD28gg*	NM_006139	42aa	RSKRSRGGHSDYMNMTPRRPGPTRKHY QPYAPPRDFAAYRS (SEQ ID NO:28)
41BB	NM_001561	42 aa	KRGRKKLLYIFKQPFMRPVQTTQEEDGC SCRFPEEEEGGCEL (SEQ ID NO:29)
OX40		42 aa	ALYLLRRDQRLPPDAHKPPGGGSFRTPIQ EEQADAHSTLAKI (SEQ ID NO:30)

#### **DESCRIPTION OF DRAWINGS**

### [0023]

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Figure 1 is a schematic depiction of IL13(E13Y)-zetakine CAR (Left) composed of the IL13Rα2-specific human IL-13 variant (huIL-13(E13Y)), human IgG4 Fc spacer (hu $\gamma_4$ Fc), human CD4 transmembrane (huCD4 tm), and human CD3 $\zeta$  chain cytoplasmic (huCD3 $\zeta$  cyt) portions as indicated. Also depicted is a IL13(EQ)BB $\zeta$  CAR which is the same as the IL13(E13Y)-zetakine with the exception of the two point mutations, L235E and N297Q indicated in red, that are located in the CH2 domain of the IgG4 spacer, and the addition of a costimulatory 4-1BB cytoplasmic domain (4-1BB cyt).

**Figures 2A-C** depict certain vectors an open reading frames. **A** is a diagram of the cDNA open reading frame of the 2670 nucleotide IL13(EQ)BBZ-T2ACD19t construct, where the IL13R $\alpha$ 2-specific ligand IL13(E13Y), IgG4(EQ) Fc hinge, CD4 transmembrane, 4-1BB cytoplasmic signaling, three-glycine linker, and CD3 $\zeta$  cytoplasmic signaling domains of the IL13(EQ)BBZ CAR, as well as the T2A ribosome skip and truncated CD19 sequences are indicated. The human GM-CSF receptor alpha and CD19 signal sequences that drive surface expression of the IL13(EQ)BB $\zeta$  CAR and CD19t are also indicated. **B** is a diagram of the sequences flanked by long terminal repeats (indicated by 'R') that will integrate into the host genome. **C** is a map of the IL13(EQ)BBZ-T2A-CD19t epHIV7 plasmid.

Figure 3 depicts the construction of pHIV7.

Figure 4 depicts the elements of pHIV7.

Figure 5 depicts a production scheme for IL13(EQ)BBζ/CD19t+ T<sub>CM</sub>.

**Figures 6A-C** depicts the results of flow cytometric analysis of surface transgene and T cell marker expression. IL13(EQ)BBζ/CD19t+ T<sub>CM</sub> HD006.5 and HD187.1 were co-stained with anti-IL13-PE and anti-CD8-FITC to detect CD8+ CAR+ and CD4+ (i.e., CD8 negative) CAR+ cells (**A**), or anti-CD 19-PE and anti-CD4-FITC to detect CD4+ CD19t+ and CD8+ (i.e., CD4 negative) CAR+ cells (**B**). IL13(EQ)BBζ/CD19t+ T<sub>CM</sub> HD006.5 and HD187.1 stained with fluorochromeconjugatedanti-CD3, TCR, CD4, CD8, CD62L and CD28 (grey histograms) or isotype controls (black histograms) (C). In all cases the percentages based on viable lymphocytes (DAPI negative) stained above isotype.

Figures 7A-B depict the in vitro functional characterization of IL13Rα2-specific effector function of IL13(EQ)BBZ+

 $T_{CM}$ - IL13(EQ)BBZ/CD19t+  $T_{CM}$  HD006.5 and HD187.1 were used as effectors in a 6-hour <sup>51</sup>Cr release assay using a 10:1 E:T ratio based on CD19t expression. The IL13R $\alpha$ 2-positive tumor targets were K562 engineered to express IL13R $\alpha$ 2 (K562-IL13R $\alpha$ 2) and primary glioma line PBT030-2, and the IL13R $\alpha$ 2-negative tumor target control was K562 parental line (**A**). IL13(EQ)BBZ/CD19t+  $T_{CM}$  HD006.5 and HD187.1 were evaluated for antigen-dependent cytokine production following overnight co-culture at a 10:1 E:T ratio with IL13R $\alpha$ 2-positive and negative targets. Cytokine levels were measured using the Bio-Plex Pro Human Cytokine TH1/TH2 Assay kit and INF- $\gamma$  are reported (**B**).

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**Figures 8A-C** depict the result of studies demonstrating the regression of established glioma tumor xenografts after adoptive transfer of IL13(EQ)BB $\zeta$ /CD19t+ T<sub>CM</sub>. EGFP-ffLuc+ PBT030-2 tumor cells (1×10<sup>5</sup>) were stereotactically implanted into the right forebrain of NSG mice. On day 5, mice received either 2x10<sup>6</sup> IL13(EQ)BB $\zeta$ /CD19t+ T<sub>CM</sub> (1.1x10<sup>6</sup> CAR+; n=6), 2x10<sup>6</sup> mock TCM (no CAR; n=6) or PBS (n=6). Representative mice from each group showing relative tumor burden using Xenogen Living Image (**A**). Quantification of ffLuc flux (photons/sec) shows that IL13(EQ)BB $\zeta$ /CD19t+ T<sub>CM</sub> induce tumor regression as compared to mock-transduced T<sub>CM</sub> and PBS (#p<0.02, \*p<0.001, repeated measures ANOVA) (**B**). Kaplan Meier survival curve (n=6 per group) demonstrating significantly improved survival (p=0.0008; log-rank test) for mice treated with IL13(EQ)BB $\zeta$ /CD19t+ T<sub>CM</sub> (**C**)

Figures 9A-C depict the results of studies comparing ant-tumor efficacy of IL13(EQ)BBZ  $T_{CM}$  and IL13-zetakine CTL clones. EGFP-ffLuc+ PBT030-2 TSs (1×10<sup>5</sup>) were stereotactically implanted into the right forebrain of NSG mice. On day 8, mice received either 1.6x10<sup>6</sup> mock  $T_{CM}$  (no CAR), 1.0×10<sup>6</sup> CAR+ IL13(EQ)BB $\zeta$   $T_{CM}$  (1.6×10<sup>6</sup> total T cells; 63% CAR), 1.0x10<sup>6</sup> IL13-zetakine CD8+ CTL cl. 2D7 (clonal CAR+), or no treatment (n=6 per group). Representative mice from each group showing relative tumor burden using Xenogen Living Image (A). Linear regression lines of natural log of ffLuc flux (photons/sec) over time, P-values are for group by time interaction comparisons (B). Kaplan Meier survival analysis (n= 6 per group) demonstrate significantly improved survival (p=0.02; log-rank test) for mice treated with IL13(EQ)BB $\zeta$   $T_{CM}$  as compared to IL13-zetakine CD8+ CTL cl. 2D7 (C).

**Figures 10A-C** depict the results of studies comparing ant-tumor efficacy of IL13(EQ)BB $\zeta$  T<sub>CM</sub> and IL13-zetakine CTL clones. EGFP-ffLuc+ PBT030-2 TSs (1×10<sup>5</sup>) were stereotactically implanted into the right forebrain of NSG mice. On day 8, mice received either 1.3x10<sup>6</sup> mock T<sub>CM</sub> (no CAR; n=6), 1.0, 0.3 or 0.1x10<sup>6</sup> CAR+ IL13(EQ)BB $\zeta$  T<sub>CM</sub> (78% CAR+; n=6-7), 1.0, 0.3 or 0.1x10<sup>6</sup> IL13-zetakine CD8+ CTL cl. 2D7 (clonal CAR+; n=6-7), or no treatment (n=5). Xenogen imaging of representative mice from each group showing relative tumor burden (**A**). Linear regression lines of natural log of ffLuc flux (photons/sec) shows that IL13(EQ)BB $\zeta$  T<sub>CM</sub> achieve superior tumor regression as compared to first-generation IL13-zetakine CTL cl. 2D7, mock T<sub>CM</sub> and tumor only (**B**). Average flux per group at day 27 post tumor injection demonstrating that the 0.1x10<sup>6</sup> IL13(EQ)BB $\zeta$  T<sub>CM</sub> dose outperforms the ten-fold higher 1.0x10<sup>6</sup> dose of IL13-zetakine CD8+ CTL cl. 2D7 (p = 0.043; Welch two sample t- test) (**C**).

**Figure 11** depicts the results of studies demonstrating IL13(EQ)BB $\zeta$  Tcm display improved persistence compared IL13-zetakine CTL clones. CD3 immunohistochemistry evaluating T cell persistence at the tumor site 7-days post T cell infusion. Significant numbers of T cells are detected for IL13(EQ)BB $\zeta$  Tcm (top panel). By contrast, very few viable CD3+ IL13-zetakine T cells are detected (bottom panel).

Figures 12A-D depict the results of experiments comparing route of CAR+ T cell delivery (i.c. versus i.v.) for large established tumors. EGFP-ffLuc+ PBT030-2 TSs (1×10<sup>5</sup>) were implanted into the right forebrain of NSG mice. On days 19 and 26, mice were injected i.v. through the tail vein with either  $5x10^6$  CAR+ IL13(EQ)BBζ+ Tcm (11.8x10<sup>6</sup> total cells; n=4), or mock Tcm (11.8x10<sup>6</sup> cells; n=4). Alternatively, on days 19, 22, 26 and 29 mice were injected i.c. with either  $1x10^6$  CAR+ IL13(EQ)BBζ+ Tcm (2.4x10<sup>6</sup> total cells; n=4), or mock Tcm (2.4x10<sup>6</sup> cells; n=5). Average ffLuc flux (photons/sec) over time shows that i.c. delivered IL13(EQ)BBζ Tcm mediates tumor regression of day 19 tumors. By comparison, i.v. delivered T cells do not shown reduction in tumor burden as compared to untreated or mock Tcm controls (A). Kaplan Meier survival curve demonstrates improved survival for mice treated i.c. IL13(EQ)BBZ Tcm as compared to mice treated with i.v. administered CAR+ Tcm (p = 0.0003 log rank test) (B). Representative H&E and CD3 IHC of mice treated i.v. (C) versus i.c. (D) with IL13(EQ)BBZ+ Tcm. CD3+ T cells were only detected in the i.c. treated group, with no CD3+ cells detected in the tumor or surrounding brain parenchyma for i.v. treated mice.

Figures 13A-B depict the results of studies showing that CAR+ T cell injected intracranially, either intratumoral (i.c.t.) or intraventricular (i.c.v.), can traffic to tumors on the opposite hemisphere. EGFP-ffLuc+ PBT030-2 TSs (1×105) were stereotactically implanted into the right and left forebrains of NSG mice. On day 6, mice were injected i.c. at the right tumor site with 1.0x10<sup>6</sup> IL13(EQ)BBζ+ Tcm (1.6x106 total cells; 63% CAR; n=4). Schematic of

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multifocal glioma experimental model (A). CD3 IHC showing T cells infiltrating both the right and left tumor sites (B).

Figures 14A-C depict the results of a series of studies evaluating costimulatory domains of IL13Rα2-specific CAR. Schematic of IL13Rα2-specific CAR constructs comparing various intracellular endo/signaling domains, including the first generation CD3z CAR lacking costimulation, versus second generation CARs incorporating either 4-1BB or CD28, versus a third generation CAR containing both CD28 and 41BB. All CAR cassettes also contain the T2A ribosomal skip and truncated CD19 (CD19t) sequences as a marker for transduced cells ( $\bf A$ ). CD4 and CD8 TCM were lentivirally transduced and CAR-expressing T cells were immunomagnetically enriched via anti-CD19. CD19 and IL13 (i.e., CAR) expression levels as measured by flow cytometry ( $\bf B$ ). Stability of each CAR construct was determined by dividing the CAR (IL13) mean flourescence intenstity (MFI) by that of the transduction marker (CD19t) ( $\bf C$ ). The 4-1BB containing CARs demonstrated the lowest expression levels as compared to the CD19t transduction marker.

- **Figures 15A-B** depict the results of studies demonstrating that IL13R $\alpha$ 2-specific CAR containing the 4-1BB costimulatory domain produce less Th1 and Th2 cytokines. The ability of the indicated mock-transduced or CAR-expressing T cells to kill IL13R $\alpha$ 2-expressing PBT030-2 tumor cell targets was determined in a 4-hour 51Cr-release assay at the indicated effector:target ratios. Mean % chromium release + S.D. of triplicate wells are depicted (**A**). As expected, mock-transduced T cells did not efficiently lyse the targets. In contrast, all CAR-expressing T cells lysed the tumor cells in a similar manner. The indicated mock-transduced or CAR-expressing T cells were co-cultured overnight with IL13R $\alpha$ 2-expressing PBT030-2 tumor cells at a 10:1 ratio and supernatants were analyzed for IL-13 and IFN-γ levels by cytometric bead array (**B**). Means + S.D. of triplicate wells are depicted. Interestingly, T cells expressing the zeta, 41BB-zeta or CD28-41BB-zeta CARs exhibited lower antigen-stimulated cytokine production than T cells expressing the CD28-zeta CAR.
- Figures 16A-C depict the results of a series of studies of the in vivo efficacy of IL13Rα2-specific CARs. NSG mice received an intracranial injection of ffLuc+ PBT030-2 tumor cells on day 0, and were randomized into 6 groups (n = 9-10 mice per group) for i.c. treatment with either PBS (Tumor Only), mock-transduced T cells or T cells expressing the indicated IL13Rα2-specific CAR on day 8. Quantitative bioluminescence imaging was then carried out to monitor tumor growth over time. Bioluminescence images for representative mice in each group (A). Mean + S.E. of total flux levels of luciferase activity over time in each group (B). Flux levels for each mouse at Day 27. All groups treated with IL13Rα2-specific CAR T cells, except those treated with T cells expressing the CD28-CAR, show statistically-significant reduction in tumor volume compared to mice treated with mock-transduced T cells (C)
  - Figure 17 depicts the amino acid sequence of IL13(EQ)BBζ/CD19t+ (SEQ ID NO:10).
  - **Figure 18** depicts a sequence comparison of IL13(EQ)41BBζ[IL13{EQ}41BBζ T2A-CD19t\_epHIV7; pF02630] (SEQ ID NO:12) and CD19Rop\_epHIV7 (pJ01683) (SEQ ID NO:13).
- Figure 19 depicts the amino acid sequence of IL13(EmY)-CD8h3-CD8tm2-41BB Zeta (SEQ ID NO:31 with GMSC-FRa signal peptide; SEQ ID NO:39 without GMSCFRa signal peptide).
  - **Figure 20** depicts the amino acid sequence of IL13(EmY)-CD8h3-CD28tm-CD28gg-41BB-Zeta (SEQ ID NO:32 with GMSCFRa signal peptide; SEQ ID NO:40 without GMSCFRa signal peptide).
- Figure 21 depicts the amino acid sequence of IL13(EmY)-IgG4(HL-CH3)-CD4tm-41BB-Zeta (SEQ ID NO:33 with GMSCFRa signal peptide; SEQ ID NO:41 without GMSCFRa signal peptide).
  - **Figure 22** depicts the amino acid sequence of IL13(EmY)-IgG4(L235E,N297Q)-CD8tm-41BB-Zeta (SEQ ID NO:34 with GMSCFRa signal peptide; SEQ ID NO:42 without GMSCFRa signal peptide).
  - **Figure 23** depicts the amino acid sequence of IL13(EmY)-Linker-CD28tm-CD28gg-41BB-Zeta (SEQ ID NO:35 with GMSCFRa signal peptide; SEQ ID NO:43without GMSCFRa signal peptide).
- Figure 24 depicts the amino acid sequence of IL13(EmY)-HL-CD28m-CD28gg-41BB-Zeta (SEQ ID NO:36 with GMSCFRa signal peptide; SEQ ID NO:44 without GMSCFRa signal peptide).
  - **Figure 25** depicts the amino acid sequence of IL13(EmY)-IgG4(HL-CH3)-CD28tm-CD28gg-41BB-Zeta (SEQ ID NO:37 with GMSCFRa signal peptide; SEQ ID NO:45 without GMSCFRa signal peptide).

**Figure 26** depicts the amino acid sequence of IL13(EmY) IgG4(L235E,N297Q)-CD28tm-CD28gg-41BB-Zeta (SEQ ID NO:38 with GMSCFRa signal peptide; SEQ ID NO:46 without GMSCFRa signal peptide).

**Figure 27** depicts the amino acid sequence of IL13(EmY)-CD8h3-CD8tm-41BB Zeta (SEQ ID NO:47 with GMSCFRa signal peptide; SEQ ID NO:48 without GMSCFRa signal peptide).

#### **DETAILED DESCRIPTION**

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[0024] Described below is the structure, construction and characterization of various IL13R $\alpha$ 2-specific chimeric antigen receptors. A chimeric antigen (CAR) is a recombinant biomolecule that contains, at a minimum, an extracellular recognition domain, a transmembrane region, and an intracellular signaling domain. The term "antigen," therefore, is not limited to molecules that bind antibodies, but to any molecule that can bind specifically to a target. For example, a CAR can include a ligand that specifically binds a cell surface receptor. The extracellular recognition domain (also referred to as the extracellular domain or simply by the recognition element which it contains) comprises a recognition element that specifically binds to a molecule present on the cell surface of a target cell. The transmembrane region anchors the CAR in the membrane. The intracellular signaling domain comprises the signaling domain from the zeta chain of the human CD3 complex and optionally comprises one or more costimulatory signaling domains. CARs can both to bind antigen and transduce T cell activation, independent of MHC restriction. Thus, CARs are "universal" immunoreceptors which can treat a population of patients with antigen-positive tumors irrespective of their HLA genotype. Adoptive immunotherapy using T lymphocytes that express a tumor-specific CAR can be a powerful therapeutic strategy for the treatment of cancer.

[0025] One IL13R $\alpha$ 2-specific CAR described herein is referred to as IL13(EQ)BB $\zeta$ . This CAR includes a variety of important features including: a IL13 $\alpha$ 2 ligand having an amino acid change that improves specificity of biding to IL13 $\alpha$ 2; the domain of CD137 (4-1BB) in series with CD3 $\zeta$  to provide beneficial costimulation; and an IgG4 Fc region that is mutated at two sites within the CH2 region (L235E; N297Q) in a manner that reduces binding by Fc receptors (FcRs). Other CAR described herein contain a second costimulatory domain.

[0026] In some cases the CAR described herein, including the IL13(EQ)BB $\zeta$  CAR can be produced using a vector in which the CAR open reading frame is followed by a T2A ribosome skip sequence and a truncated CD19 (CD19t), which lacks the cytoplasmic signaling tail (truncated at amino acid 323). In this arrangement, co-expression of CD19t provides an inert, non-immunogenic surface marker that allows for accurate measurement of gene modified cells, and enables positive selection of gene-modified cells, as well as efficient cell tracking and/or imaging of the therapeutic T cells in vivo following adoptive transfer. Co-expression of CD19t provides a marker for immunological targeting of the transduced cells in vivo using clinically available antibodies and/or immunotoxin reagents to selectively delete the therapeutic cells, and thereby functioning as a suicide switch.

**[0027]** Gliomas, express IL13 receptors, and in particular, high-affinity IL13 receptors. However, unlike the IL13 receptor, glioma cells overexpress a unique IL13R $\alpha$ 2 chain capable of binding IL13 independently of the requirement for IL4R $\beta$  or  $\gamma$ c44. Like its homolog IL4, IL13 has pleotropic immunoregulatory activity outside the CNS. Both IL13 and IL4 stimulate IgE production by B lymphocytes and suppress pro-inflammatory cytokine production by macrophages.

[0028] Detailed studies using autoradiography with radiolabeled IL13 have demonstrated abundant IL13 binding on nearly all malignant glioma tissues studied. This binding is highly homogeneous within tumor sections and in single cell analysis. However, molecular probe analysis specific for IL13R $\alpha$ 2 mRNA did not detect expression of the glioma-specific receptor by normal brain elements and autoradiography with radiolabeled IL13 also could not detect specific IL13 binding in the normal CNS. These studies suggest that the shared IL13R $\alpha$ 1/IL4 $\beta$ / $\gamma$ c receptor is not expressed detectably in the normal CNS. Therefore, IL13R $\alpha$ 2 is a very specific cell-surface target for glioma and is a suitable target for a CAR designed for treatment of a glioma.

[0029] Binding of IL13-based therapeutic molecules to the broadly expressed IL13R $\alpha$ 1/IL4 $\beta$ / $\gamma$ c receptor complex, however, has the potential of mediating undesired toxicities to normal tissues outside the CNS, and thus limits the systemic administration of these agents. An amino acid substitution in the IL13 alpha helix A at amino acid 13 of tyrosine for the native glutamic acid selectively reduces the affinity of IL13 to the IL13R $\alpha$ 1/IL4 $\beta$ / $\gamma$ c receptor. Binding of this mutant (termed IL13(E13Y)) to IL13R $\alpha$ 2, however, was increased relative to wild-type IL13. Thus, this minimally altered IL13 analog simultaneously increases IL13's specificity and affinity for glioma cells. Therefore, CAR described herein include an IL13 containing a mutation (E to Y or E to some other amino acid such as K or R or L or V) at amino acid 13 (according to the numbering of Debinski et al. 1999 Clin Cancer Res 5:3143s). IL13 having the natural sequence also may be used, however, and can be useful, particularly in situations where the modified T cells are to be locally administered, such as by injection directly into a tumor mass.

**[0030]** The CAR described herein can be produced by any means known in the art, though preferably it is produced using recombinant DNA techniques. Nucleic acids encoding the several regions of the chimeric receptor can be prepared and assembled into a complete coding sequence by standard techniques of molecular cloning known in the art (genomic

library screening, PCR, primer-assisted ligation, site-directed mutagenesis, etc.) as is convenient. The resulting coding region is preferably inserted into an expression vector and used to transform a suitable expression host cell line, preferably a T lymphocyte cell line, and most preferably an autologous T lymphocyte cell line.

[0031] Various T cell subsets isolated from the patient, including unselected PBMC or enriched CD3 T cells or enriched CD3 or memory T cell subsets, can be transduced with a vector for CAR expression. Central memory T cells are one useful T cell subset. Central memory T cell can be isolated from peripheral blood mononuclear cells (PBMC) by selecting for CD45RO+/CD62L+ cells, using, for example, the CliniMACS® device to immunomagnetically select cells expressing the desired receptors. The cells enriched for central memory T cells can be activated with anti-CD3/CD28, transduced with, for example, a SIN lentiviral vector that directs the expression of an IL13R $\alpha$ 2-specific CAR (e.g., IL13(EQ)BB $\zeta$ + as well as a truncated human CD19 (CD19t), a non-immunogenic surface marker for both in vivo detection and potential ex vivo selection. The activated/genetically modified central memory T cells can be expanded in vitro with IL-2/IL-15 and then cryopreserved.

### Example 1: Construction and Structure of an IL13Rα2-specific CAR

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[0032] The structure of a useful IL13R $\alpha$ 2-specific CAR is described below. The codon optimized CAR sequence contains a membrane-tethered IL-13 ligand mutated at a single site (E13Y) to reduce potential binding to IL13R $\alpha$ 1, an IgG4 Fc spacer containing two mutations (L235E; N297Q) that greatly reduce Fc receptor-mediated recognition models, a CD4 transmembrane domain, a costimulatory 4-1BB cytoplasmic signaling domain, and a CD3 $\zeta$  cytoplasmic signaling domain. A T2A ribosome skip sequence separates this IL13(EQ)BB $\zeta$  CAR sequence from CD19t, an inert, non-immunogenic cell surface detection/selection marker. This T2A linkage results in the coordinate expression of both IL13(EQ)BB $\zeta$  and CD19t from a single transcript. **Figure 1A** is a schematic drawing of the 2670 nucleotide open reading frame encoding the IL13(EQ)BBZ-T2ACD19t construct. In this drawing, the IL13R $\alpha$ 2-specific ligand IL13(E13Y), IgG4(EQ) Fc, CD4 transmembrane, 4-1BB cytoplasmic signaling, three-glycine linker, and CD3 $\zeta$  cytoplasmic signaling domains of the IL13(EQ)BBZ CAR, as well as the T2A ribosome skip and truncated CD19 sequences are all indicated. The human GM-CSF receptor alpha and CD19 signal sequences that drive surface expression of the IL13(EQ)BBZ CAR and CD19t are also indicated. Thus, the IL13(EQ)BBZ-T2ACD19t construct includes a IL13R $\alpha$ 2-specific, hinge-optimized, costimulatory chimeric immunoreceptor sequence (designated IL13(EQ)BBZ), a ribosome-skip T2A sequence, and a CD19t sequence.

**[0033]** The IL13(EQ)BBZ sequence was generated by fusion of the human GM-CSF receptor alpha leader peptide with IL13(E13Y) ligand 5 L235E/N297Q-modified IgG4 Fc hinge (where the double mutation interferes with FcR recognition), CD4 transmembrane, 4-1BB cytoplasmic signaling domain, and CD3ζ cytoplasmic signaling domain sequences. This sequence was synthesized de novo after codon optimization. The T2A sequence was obtained from digestion of a T2A-containing plasmid. The CD19t sequence was obtained from that spanning the leader peptide sequence to the transmembrane components (i.e., basepairs 1-972) of a CD19-containing plasmid. All three fragments, 1) IL13(EQ)BBZ, 2) T2A, and 3) CD19t, were cloned into the multiple cloning site of the epHIV7 lentiviral vector. When transfected into appropriate cells, the vector integrates the sequence depicted schematically in **Figure 1B** into the host cells genome. **Figure 1C** provides a schematic drawing of the 9515 basepair IL13(EQ)BBZ-T2A-CD19t epHIV7 plasmid itself.

[0034] As shown schematically in Figure 2, IL13(EQ)BBZ CAR differs in several important respects from a previously described IL13R $\alpha$ 2-specific CAR referred to as IL13(E13Y)-zetakine (Brown et al. 2012 Clinical Cancer Research 18:2199). The IL13(E13Y)-zetakine is composed of the IL13R $\alpha$ 2-specific human IL-13 mutein (huIL-13(E13Y)), human IgG4 Fc spacer (hu $\gamma$ 4Fc), human CD4 transmembrane (huCD4 tm), and human CD3 $\zeta$  chain cytoplasmic (huCD3 $\zeta$  cyt) portions as indicated. In contrast, the IL13(EQ)BB $\zeta$ + has two point mutations, L235E and N297Q that are located in the CH2 domain of the IgG4 spacer, and a costimulatory 4-1BB cytoplasmic domain (4-1BB cyt).

#### Example 2: Construction and Structure of epHIV7 used for Expression of an IL13Rα2-specific CAR

[0035] The pHIV7 plasmid is the parent plasmid from which the clinical vector IL13(EQ)BBZ-T2A-CD19t\_epHIV7 was derived in the T cell Therapeutics Research Laboratory (TCTRL) at City of Hope (COH). The epHIV7 vector used for expression of the CAR was produced from pHIV7 vector. Importantly, this vector uses the human EF1 promoter to drive expression of the CAR. Both the 5' and 3' sequences of the vector were derived from pv653RSN as previously derived from the HXBc2 provirus. The polypurine tract DNA flap sequences (cPPT) were derived from HIV-1 strain pNL4-3 from the NIH AIDS Reagent Repository. The woodchuck post-transcriptional regulatory element (WPRE) sequence was previously described.

**[0036]** Construction of pHIV7 is schematically depicted in Figure 3. Briefly, pv653RSN, containing 653 bp from gagpol plus 5' and 3' long-terminal repeats (LTRs) with an intervening SL3-neomycin phosphotransferase gene (Neo), was subcloned into pBluescript, as follows: In Step 1, the sequences from 5' LTR to rev-responsive element (RRE) made p5'HIV-1 51, and then the 5' LTR was modified by removing sequences upstream of the TATA box, and ligated first to

a CMV enhancer and then to the SV40 origin of replication (p5'HIV-2). In Step 2, after cloning the 3' LTR into pBluescript to make p3'HIV-1, a 400-bp deletion in the 3' LTR enhancer/promoter was made to remove cis-regulatory elements in HIV U3 and form p3'HIV-2. In Step 3, fragments isolated from the p5'HIV-3 and p3'HIV-2 were ligated to make pHIV-3. In Step 4, the p3'HIV-2 was further modified by removing extra upstream HIV sequences to generate p3'HIV-3 and a 600-bp BamHI-Sall fragment containing WPRE was added to p3'HIV-3 to make the p3'HIV-4. In Step 5, the pHIV-3 RRE was reduced in size by PCR and ligated to a 5' fragment from pHIV-3 (not shown) and to the p3'HIV-4, to make pHIV-6. In Step 6, a 190-bp BgIII-BamHI fragment containing the cPPT DNA flap sequence from HIV-1 pNL4-3 (55) was amplified from pNL4-3 and placed between the RRE and the WPRE sequences in pHIV6 to make pHIV-7. This parent plasmid pHIV7-GFP (GFP, green fluorescent protein) was used to package the parent vector using a four-plasmid system. [0037] A packaging signal, psi  $\psi$ , is required for efficient packaging of viral genome into the vector. The RRE and WPRE enhance the RNA transcript transport and expression of the transgene. The flap sequence, in combination with WPRE, has been demonstrated to enhance the transduction efficiency of lentiviral vector in mammalian cells.

**[0038]** The helper functions, required for production of the viral vector), are divided into three separate plasmids to reduce the probability of generation of replication competent lentivirus via recombination: 1) pCgp encodes the gag/pol protein required for viral vector assembly; 2) pCMV-Rev2 encodes the Rev protein, which acts on the RRE sequence to assist in the transportation of the viral genome for efficient packaging; and 3) pCMV-G encodes the glycoprotein of the vesiculo-stomatitis virus (VSV), which is required for infectivity of the viral vector.

**[0039]** There is minimal DNA sequence homology between the pHIV7 encoded vector genome and the helper plasmids. The regions of homology include a packaging signal region of approximately 600 nucleotides, located in the gag/pol sequence of the pCgp helper plasmid; a CMV promoter sequence in all three helper plasmids; and a RRE sequence in the helper plasmid pCgp. It is highly improbable that replication competent recombinant virus could be generated due to the homology in these regions, as it would require multiple recombination events. Additionally, any resulting recombinants would be missing the functional LTR and tat sequences required for lentiviral replication.

**[0040]** The CMV promoter was replaced by the EF1 $\alpha$ -HTLV promoter (EF1p), and the new plasmid was named epHIV7 (**Figure 4**). The EF1p has 563 bp and was introduced into epHIV7 using Nrul and Nhel, after the CMV promoter was excised.

[0041] The lentiviral genome, excluding gag/pol and rev that are necessary for the pathogenicity of the wild-type virus and are required for productive infection of target cells, has been removed from this system. In addition, the IL13(EQ)BBZ-T2ACD19t\_epHIV7 vector construct does not contain an intact 3'LTR promoter, so the resulting expressed and reverse transcribed DNA proviral genome in targeted cells will have inactive LTRs. As a result of this design, no HIV-I derived sequences will be transcribed from the provirus and only the therapeutic sequences will be expressed from their respective promoters. The removal of the LTR promoter activity in the SIN vector is expected to significantly reduce the possibility of unintentional activation of host genes (56). Table 4 summarizes the various regulator elements present in IL13(EQ)BBZ-T2ACD19t epHIV7.

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	Table 4 Functional elements of IL13(EQ)41BBZ-T2A-CD19t_epHIV7										
Regulatory Elements and Genes	Location (Nucleotide Numbers)	Comments									
U5	87-171	5' Unique sequence									
psi	233-345	Packaging signal									
RRE	957-1289	Rev-responsive element									
flap	1290-1466	Contains polypurine track sequence and central termination sequence to facilitate nuclear import of pre-integration complex									
FF1p Promoter	1524-2067	EF1-alpha Eukaryotic Promoter sequence driving expression of CD19Rop									
IL13-IgG4 (EQ)- 41BB-Zeta-T2A- CD19t	2084-4753	Therapeutic insert									
WPRE	4790-5390	Woodchuck hepatitis virus derived regulatory element to enhance viral RNA transportation									
delU3	5405-5509	3' U3 with deletion to generate SIN vector									
R	5510-5590	Repeat sequence within LTR									

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(continued)

Table 4 Functional elements of IL13(EQ)41BBZ-T2A-CD19t_epHIV7									
Regulatory Elements and Genes	Location (Nucleotide Numbers)	Comments							
U5	5591-5704	3' U5 sequence in LTR							
Amp <sup>R</sup>	6540-7398	Ampicillin-resistance gene							
CoE1 ori	7461-8342	Replication origin of plasmid							
SV40 ori	8639-8838	Replication origin of SV40							
CMV promoter	8852-9451	CMV promoter to generate viral genome RNA							
R	9507-86	Repeat sequence within LTR							

Example 3: Production of Vectors for Transduction of Patient T Cells

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**[0042]** For each plasmid (IL13(EQ)BBZ-T2A-CD19t\_epHIV7; pCgp; pCMV-G; and pCMV-Rev2), a seed bank is generated, which is used to inoculate the fermenter to produce sufficient quantities of plasmid DNA. The plasmid DNA is tested for identity, sterility and endotoxin prior to its use in producing lentiviral vector.

**[0043]** Briefly, cells were expanded from the 293T working cell (WCB), which has been tested to confirm sterility and the absence of viral contamination. A vial of 293T cells from the 293T WCB was thawed. Cells were grown and expanded until sufficient numbers of cells existed to plate an appropriate number of 10 layer cell factories (CFs) for vector production and cell train maintenance. A single train of cells can be used for production.

[0044] The lentiviral vector was produced in sub-batches of up to 10 CFs. Two sub-batches can be produced in the same week leading to the production of approximately 20 L of lentiviral supernatant/week. The material produced from all sub-batches were pooled during the downstream processing phase, in order to produce one lot of product. 293T cells were plated in CFs in 293T medium (DMEM with 10% FBS). Factories were placed in a 37°C incubator and horizontally leveled in order to get an even distribution of the cells on all the layers of the CF. Two days later, cells were transfected with the four lentiviral plasmids described above using the CaPO4 method, which involves a mixture of Tris:EDTA, 2M CaCl2, 2X HBS, and the four DNA plasmids. Day 3 after transfection, the supernatant containing secreted lentiviral vectors was collected, purified and concentrated. After the supernatant was removed from the CFs, End-of-Production Cells were collected from each CF. Cells were trypsinized from each factory and collected by centrifugation. Cells were resuspended in freezing medium and cryopreserved. These cells were later used for replication-competent lentivirus (RCL) testing.

[0045] To purify and formulate vectors crude supernatant was clarified by membrane filtration to remove the cell debris. The host cell DNA and residual plasmid DNA were degraded by endonuclease digestion (Benzonase®). The viral supernatant was clarified of cellular debris using a  $0.45~\mu m$  filter. The clarified supernatant was collected into a preweighed container into which the Benzonase® is added (final concentration 50 U/mL). The endonuclease digestion for residual plasmid DNA and host genomic DNA as performed at  $37^{\circ}C$  for 6 h. The initial tangential flow ultrafiltration (TFF) concentration of the endonuclease-treated supernatant was used to remove residual low molecular weight components from the crude supernatant, while concentrating the virus ~20 fold. The clarified endonuclease-treated viral supernatant was circulated through a hollow fiber cartridge with a NMWCO of 500 kD at a flow rate designed to maintain the shear rate at ~4,000 sec-1 or less, while maximizing the flux rate. Diafiltration of the nuclease-treated supernatant was initiated during the concentration process to sustain the cartridge performance. An 80% permeate replacement rate was established, using 4% lactose in PBS as the diafiltration buffer. The viral supernatant was brought to the target volume, representing a 20-fold concentration of the crude supernatant, and the diafiltration was continued for 4 additional exchange volumes, with the permeate replacement rate at 100%.

**[0046]** Further concentration of the viral product was accomplished by using a high speed centrifugation technique. Each sub-batch of the lentivirus was pelleted using a Sorvall RC-26 plus centrifuge at 6000 RPM (6,088 RCF) at 6oC for 16-20 h. The viral pellet from each sub-batch was then reconstituted in a 50 mL volume with 4% lactose in PBS. The reconstituted pellet in this buffer represents the final formulation for the virus preparation. The entire vector concentration process resulted in a 200-fold volume reduction, approximately. Following the completion of all of the sub-batches, the material was then placed at -80oC, while samples from each sub-batch were tested for sterility. Following confirmation of sample sterility, the sub-batches were rapidly thawed at 37oC with frequent agitation. The material was then pooled and manually aliquoted in the Class II Type A/B3 biosafety cabinet in the viral vector suite. A fill configuration of 1 mL

of the concentrated lentivirus in sterile USP class 6, externally threaded O-ring cryovials was used. Center for Applied Technology Development (CATD)'s Quality Systems (QS) at COH released all materials according to the Policies and Standard Operating Procedures for the CBG and in compliance with current Good Manufacturing Practices (cGMPs). [0047] To ensure the purity of the lentiviral vector preparation, it was tested for residual host DNA contaminants, and the transfer of residual host and plasmid DNA. Among other tests, vector identity was evaluated by RT-PCR to ensure that the correct vector is present. All release criteria were met for the vector intended for use in this study.

#### Example 4: Preparation of T cells Suitable for Use in ACT

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**[0048]** T lymphocytes are obtained from a patient by leukopheresis, and the appropriate allogenic or autologous T cell subset, for example, Central Memory T cells (T<sub>CM</sub>), are genetically altered to express the CAR, then administered back to the patient by any clinically acceptable means, to achieve anti-cancer therapy.

[0049] An outline of the manufacturing strategy for  $T_{CM}$  is depicted in **Figure 8** (Manufacturing schema for IL13(EQ)BB $\zeta$ /CD19t+  $T_{CM}$ ). Specifically, apheresis products obtained from consented research participants are ficolled, washed and incubated overnight. Cells are then depleted of monocyte, regulatory T cell and naive T cell populations using GMP grade anti-CD14, anti-CD25 and anti-CD45RA reagents (Miltenyi Biotec) and the CliniMACS<sup>TM</sup> separation device. Following depletion, negative fraction cells are enriched for CD62L+  $T_{CM}$  cells using DREG56-biotin (COH clinical grade) and anti-biotin microbeads (Miltenyi Biotec) on the CliniMACSTM separation device.

[0050] Following enrichment, T<sub>CM</sub> cells are formulated in complete X-Vivo15 plus 50 IU/mL IL-2 and 0.5 ng/mL IL-15 and transferred to a Teflon cell culture bag, where they are stimulated with Dynal ClinEx™ Vivo CD3/CD28 beads. Up to five days after stimulation, cells are transduced with IL13(EQ)BBZ-T2A-CD19t\_epHIV7 lentiviral vector at a multiplicity of infection (MOI) of 1.0 to 0.3. Cultures are maintained for up to 42 days with addition of complete X-Vivo15 and IL-2 and IL-15 cytokine as required for cell expansion (keeping cell density between 3x10<sup>5</sup> and 2x10<sup>6</sup> viable cells/mL, and cytokine supplementation every Monday, Wednesday and Friday of culture). Cells typically expand to approximately 10<sup>9</sup> cells under these conditions within 21 days. At the end of the culture period cells are harvested, washed twice and formulated in clinical grade cryopreservation medium (Cryostore CS5, BioLife Solutions).

**[0051]** On the day(s) of T cell infusion, the cryopreserved and released product is thawed, washed and formulated for re-infusion. The cryopreserved vials containing the released cell product are removed from liquid nitrogen storage, thawed, cooled and washed with a PBS/2% human serum albumin (HSA) Wash Buffer. After centrifugation, the supernatant is removed and the cells resuspended in a Preservative-Free Normal Saline (PFNS)/ 2% HSA infusion diluent. Samples are removed for quality control testing.

[0052] Two qualification runs on cells procured from healthy donors were performed using the manufacturing platform described above. Each preclinical qualification run product was assigned a human donor (HD) number - HD006.5 and HD187.1. Importantly, as shown in Table 5, these qualification runs expanded >80 fold within 28 days and the expanded cells expressed the IL13(EQ)BBy/CD19t transgenes.

Table 5: Summary of Expression Data from Pre-clinical Qualification Run Product

Cell Product	CAR	CD19	CD4+	CD8+	Fold Expansion		
HD006.5	20%	22%	24%	76%	84-fold (28 days)		
Hd187.1	18%	25%	37%	63%	259-fold (28 days)		

Example 5: Flow cytometric analysis of surface transgene and T cell marker expression in IL13(EQ)BB $\gamma$ /CD19t+T<sub>CM</sub>

[0053] The two preclinical qualification run products described in Example 4 were used in pre-clinical studies to as described below. Figures 6A-C depict the results of flow cytometric analysis of surface transgene and T cell marker expression. IL13(EQ)BBγ/CD19t+ T<sub>CM</sub> HD006.5 and HD187.1 were co-stained with anti-IL13-PE and anti-CD8-FITC to detect CD8+ CAR+ and CD4+ (i.e., CD8 negative) CAR+ cells (Figure 6A), or anti-CD 19-PE and anti-CD4-FITC to detect CD4+ CD19t+ and CD8+ (i.e., CD4 negative) CAR+ cells (Figure 6B). IL13(EQ)BBγ/CD19t+ T<sub>CM</sub> HD006.5 and HD187.1 were stained with fluorochrome-conjugated anti-CD3, TCR, CD4, CD8, CD62L and CD28 (grey histograms) or isotype controls (black histograms). (Figure 6C). In each of Figures 6A-C, the percentages indicated are based on viable lymphocytes (DAPI negative) stained above isotype.

Example 6: Effector Activity of IL 13(EQ)BBγ/CD19t+ T<sub>CM</sub>

[0054] The effector activity of IL13(EQ)BB $\zeta$ /CD19t+ T<sub>CM</sub> was assessed and the results of this analysis are depicted in Figures 7A-B. Briefly, IL13(EQ)BB $\gamma$ /CD19t+ T<sub>CM</sub> HD006.5 and HD187.1 were used as effectors in a 6-hour 51Cr-

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release assay using a 10E:1T ratio based on CD19t expression. The IL13R $\alpha$ 2-positive tumor targets were K562 engineered to express IL13R $\alpha$ 2 (K562-IL13R $\alpha$ 2) and primary glioma line PBT030-2, and the IL13R $\alpha$ 2-negative tumor target control was the K562 parental line (**Figure 7A**). IL13(EQ)BB $\gamma$ /CD19t+ HD006.5 and HD187.1 were evaluated for antigendependent cytokine production following overnight co-culture at a 10E:1T ratio with the same IL13R $\alpha$ 2-positive and negative targets as described in above. Cytokine levels were measured using the Bio-Plex Pro Human Cytokine TH1/TH2 Assay kit and INF- $\gamma$  levels are depicted (**Figure 7B**).

### Example 7: In vivo Anti-tumor Activity of IL13(EQ)BBγ/CD19t+ T<sub>CM</sub>

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[0055] The studies described below demonstrate that IL13(EQ)BB $\gamma$ /CD19t+ T<sub>CM</sub> exhibit anti-tumor efficacy in *in vivo* mouse models. Specifically, we have evaluated the anti-tumor potency of IL13(EQ)BB $\gamma$ /CD19t+ T<sub>CM</sub> against the IL13R $\alpha$ 2+ primary low-passage glioblastoma tumor sphere line PBT030-2, which has been engineered to express both EGFP and firefly luciferase (ffLuc) reporter genes (PBT030-2 EGFP:ffLuc) (6). A panel of primary lines (PBT) from patient glioblastoma specimens grown as tumor spheres (TSs) in serum-free media. These expanded TS lines exhibit stem cell-like characteristics, including expression of stem cell markers, multilineage differentiation and capacity to initiate orthotopic tumors in immunocompromised mice (NSG) at low cell numbers. The PBT030-2 EGFP:ffLuc TS-initiated xenograft model (0.1x106 cells; 5 day engraftment) has been previously used to evaluate in vivo anti-tumor activity in NSG mice of IL13R $\alpha$ 2-specific CAR expressing T cells, whereby three injections of 2x106 cytolytic T lymphocytes (CTLs) over a course of 2 weeks were shown to reduce tumor growth. However, in those experiments the majority of the PBT030-2 tumors eventually recurred. By comparison, a single injection of IL13(EQ)BB $\gamma$ /CD19t+ T<sub>CM</sub> (1.1x106 CAR+ T<sub>CM</sub>; 2x106 total TCM) exhibited robust anti-tumor activity against PBT030-2 EGFP:ffLuc TS-initiated tumors (0.1x106 cells; 5 day engraftment) as shown in **Figures 8A-C**. As compared to NSG mice treated with either PBS or mock transduced T<sub>CM</sub> (no CAR), IL13(EQ)BB $\gamma$ /CD19t+ T<sub>CM</sub> significantly reduce ffLuc flux (p < 0.001 at >18-days) and significantly improve survival (p = 0.0008).

[0056] Briefly, EGFP-ffLuc+ PBT030-2 tumor cells ( $1 \times 10^5$ ) were stereotactically implanted into the right forebrain of NSG mice. On day 5, mice received either  $2 \times 10^6$  IL13(EQ)BB $\gamma$ /CDI9t+  $T_{CM}$  ( $1.1 \times 10^6$  CAR+; n=6),  $2 \times 10^6$  mock  $T_{CM}$  (no CAR; n=6) or PBS (n=6). **Figure 8A** depicts representative mice from each group showing relative tumor burden using Xenogen Living Image. Quantification of ffLuc flux (photons/sec) shows that IL13(EQ)BB $\zeta$ /CD19t+  $T_{CM}$  induce tumor regression as compared to mock-transduced  $T_{CM}$  and PBS (#p<0.02, \*p<0.001, repeated measures ANOVA) (**Figure 8B**). As shown in **Figure 8C**, a Kaplan Meier survival curve (n=6 per group) demonstrates significantly improved survival (p=0.0008; log-rank test) for mice treated with IL13(EQ)BB $\gamma$ /CD19t+  $T_{CM}$ .

# Example 8: Comparison of IL13(EQ)BB $\zeta$ + Tcm and Non-Tcm IL13-zetakine CD8+ CTL Clones in Antitumor Efficacy and T cell Persistence

[0057] The studies described below compare IL13(EQ)BB $\zeta$ + Tcm and a previously created IL13R $\alpha$ 2-specific human CD8+ CTLs (IL13-zetakine CD8+ CTL (described in Brown et al. 2012 Clin Cancer Res 18:2199 and Kahlon et al. 2004 Cancer Res 64:9160). The IL13-zetakine uses a CD3 $\zeta$  stimulatory domain, lacks a co-stimulatory domain and uses the same IL13 variant as IL13(EQ)BB $\zeta$ +.

[0058] A panel of primary lines (PBT) from patient glioblastoma specimens grown as tumor spheres (TSs) in serum-free media was generated (Brown et al. 2012 Clin Cancer Res 18:2199; Brown et al. 2009 Cancer Res 69:8886). These expanded TS lines exhibit stem cell-like characteristics, including expression of stem cell markers, multi-lineage differentiation and capacity to initiate orthotopic tumors in immunocompromised mice (NSG) at low cell numbers. The IL13R $\alpha$ 2+ primary low-passage glioblastoma TS line PBT030-2, which has been engineered to express both EGFP and firefly luciferase (ffLuc) reporter genes (PBT030-2 EGFP:ffLuc) (Brown et al. 2012 Clin Cancer Res 18:2199) was used for the experiments outlined below.

[0059] First, a single dose (1x10<sup>6</sup> CAR T cells) of IL13(EQ)BB $\zeta$ + Tcm product was compared to IL13-zetakine CD8+ CTL clones evaluated against day 8 PBT030-2 EGFP:ffuc TS-initiated xenografts (0.1x10<sup>6</sup> cells). While both IL13R $\alpha$ 2-specific CAR T cells (IL13-zetakine CTL and IL13(EQ)BB $\zeta$  Tcm) demonstrated antitumor activity against established PBT030-2 tumors as compared to untreated and mock Tcm (CAR-negative) controls (**Figures 9A** and **9B**), IL13(EQ)BBZ+ Tcm mediated significantly improved survival and durable tumor remission with mice living >150 days as compared to our first-generation IL13-zetakine CD8+ CTL clones (**Figure 9C**).

[0060] To further compare the therapeutic effectiveness of these two IL13R $\alpha$ 2-CAR T cell products, a dose titration of 1.0, 0.3 and 0.1x10 $^6$  CAR T cells against day 8 PBT030-2 EGFP:ffuc TS-initiated tumors was performed (**Figures 10A-C**). The highest dose (1x10 $^6$ ) of IL13-zetakine CD8+ CTL cl. 2D7 mediated antitumor responses as measured by Xenogen flux in 3 of 6 animals (**Figure 10C**), but no significant antitumor responses were observed at lower CAR T cell doses. By comparison, injection of IL13(EQ)BB $\zeta$ + Tcm product mediated complete tumor regression in the majority of mice at all dose levels, including treatment with as few as 0.1x10 $^6$  CAR T cells. These data demonstrate that

IL13(EQ)BB $\zeta$ + Tcm is at least 10-fold more potent than IL13-zetakine CD8+ CTL clones in antitumor efficacy. The improved anti-tumor efficacy of is due to improved T cell persistence in the tumor microenvironment. Evaluation of CD3+ T cells 7-days post i.c. injection revealed significant numbers of IL13(EQ)BB $\zeta$ + Tcm in the tumor microenvironment, whereas very few first-generation IL13-zeta CTLs were present (**Figure 11**).

Example 9: Comparison of CAR T cell delivery route for treatment of large TS-initiated PBT tumors

[0061] Described below are studies that compare the route of delivery, intraveneous (i.v.) or intracranial (i.c.), on antitumor activity against invasive primary PBT lines. In pilot studies (data not shown), it was unexpectedly observed that i.v. administered IL13(EQ)BB\$\(\xi\)+ Tcm provided no therapeutic benefit as compared to PBS for the treatment of small (day 5) PBT030-2 EGFP:ffLuc tumors. This is in contrast to the robust therapeutic efficacy observed with i.c. administered CAR+ T cells. Reasoning that day 5 PBT030-2 tumors may have been too small to recruit therapeutic T cells from the periphery, a comparison was made of i.v. versus i.c. delivery against larger day 19 PBT030-2 EGFP:ffLuc tumors. For these studies, PBT030-2 engrafted mice were treated with either two i.v. infusions (5 x 10\(^6\) CAR+ Tcm; days 19 and 26) or four i.c. infusions (1 x 10\(^6\) CAR+ Tcm; days 19, 22, 26 and 29) of IL13(EQ)BBZ+ Tcm, or mock Tcm (no CAR). Here too no therapeutic benefit as monitored by Xenogen imaging or Kaplan-Meier survival analysis for i.v. administered CAR+ T cells (Figures 12A and 12B). In contrast, potent antitumor activity was observed for i.c. administered IL13(EQ)BB\$\(\xi\)+ Tcm (Figures 12A-B). Next, brains from a cohort of mice 7 days post T cell injection were harvested and evaluated for CD3+ human T cells by IHC. Surprisingly, for mice treated i.v. with either mock Tcm or IL13(EQ)BB\$\(\xi\)+ Tcm there were no detectable CD3+ human T cells in the tumor or in others mouse brain regions where human T cells typically reside (i.e. the leptomeninges) (Figure 12C), suggesting a deficit in tumor tropism. This is in contrast to the significant number of T cells detected in the i.c. treated mice (Figure 12D).

[0062] Tumor derived cytokines, particularly MCP-1/CCL2, are important in recruiting T cells to the tumor. Thus, PBT030-2 tumor cells were evaluated and it was found that this line produces high levels of MCP-1/CCL2 comparable to U251T cells (data not shown), a glioma line previously shown to attract i.v. administered effector CD8+ T cells to i.c. engrafted tumors. Malignant gliomas are highly invasive tumors and are often multifocal in presentation. The studies described above establish that IL13BBZ T<sub>CM</sub> can eliminate infiltrated tumors such as PBT030-2, and mediate long-term durable antitumor activity. The capacity of intracranially delivered CAR T cells to traffic to multifocal disease was also examined. For this study PBT030-2 EGFP:ffLuc TSs were implanted in both the left and right hemispheres (Figure 13A) and CAR+ T cells were injected only at the right tumor site. Encouragingly, for all mice evaluated (n=3) we detected T cells by CD3 IHC 7-days post T cell infusion both at the site of injection (i.e. right tumor), as well within the tumor on the left hemisphere (Figure 13B). These findings provide evidence that CAR+ T cells are able to traffic to and infiltrate tumor foci at distant sites. Similar findings were also observed in a second tumor model using the U251T glioma cell line (data not shown).

Example 10: Comparison of Costimulatory Domains

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[0063] A series of studies were conducted to evaluate various costimulatory domains. The various CAR evaluated are depicted schematically in **Figure 14A** and included a first generation CD3 $\zeta$  CAR lacking a costimulatory domain, two second generation CARs incorporating either a 4-1BB costimulatory domain or a CD28 costimulatory domain, and a third generation CAR containing both a CD28 costimulatory domain and 41BB costimulatory domain. All CAR constructs also contain the T2A ribosomal skip sequence and a truncated CD19 (CD19t) sequence as a marker for transduced cells. [0064] CD4 and CD8  $T_{CM}$  were lentivirally transduced and CAR-expressing T cells were immunomagnetically enriched via anti-CD19. CD19 and IL13 (i.e., CAR) expression levels as measured by flow cytometry. The results are shown in **Figure 14B**. Stability of each CAR construct was determined by dividing the CAR (IL13) mean flourescence intenstity (MFI) by that of the transduction marker (CD19t) (**Figure 14C**). The two CAR including a 4-1BB costimulatory domain exhibited the lowest expression levels as compared to the CD19t transduction marker.

[0065] The ability of the indicated mock-transduced or CAR-expressing T cells to kill IL13R $\alpha$ 2-expressing PBT030-2 tumor cell targets was determined in a 4-hour <sup>51</sup>Cr-release assay at the indicated effector:target ratios. The results of this study are in **Figure 15A** (mean % chromium release + S.D. of triplicate wells are depicted). As expected, mock-transduced T cells did not efficiently lyse the targets. In contrast, all CAR-expressing T cells lysed the tumor cells in a similar manner. **Figure 15B** depicts the results of a study in which the indicated mock-transduced or CAR-expressing T cells were co-cultured overnight with IL13R $\alpha$ 2-expressing PBT030-2 tumor cells at a 10:1 ratio and supernatants were analyzed for IL-13 and IFN- $\gamma$  levels by cytometric bead array. Interestingly, T cells expressing the zeta, 41BB-zeta or CD28-41BB-zeta CARs exhibited lower antigen-stimulated cytokine production than T cells expressing the CD28-zeta CAR.

**[0066]** The in vivo efficacy of the various CAR was examined as follows. Briefly, NSG mice received an intracranial injection of ffLuc+ PBT030-2 tumor cells on day 0, and were randomized into 6 groups (n = 9-10 mice per group) for i.c.

treatment with either PBS (Tumor Only), mock-transduced T cells or T cells expressing the indicated IL13R $\alpha$ 2-specific CAR on day 8. Quantitative bioluminescence imaging was then carried out to monitor tumor growth over time. Bioluminescence images for representative mice in each group (**Figure 16A**). Flux levels for each mouse at Day 27 (**Figure 16B**). All groups treated with IL13R $\alpha$ 2-specific CAR T cells, except those treated with T cells expressing the CD28-CAR, show statistically-significant reduction in tumor volume compared to mice treated with mock-transduced T cells (**Figure 16C**).

### Example 11: Amino acid Sequence of IL13(EQ)BBζ/CD19t

10 [0067] The complete amino acid sequence of IL13(EQ)BBZ/CD19t is depicted in Figure 17. The entire sequence (SEQ ID NO:1) includes: a 22 amino acid GMCSF signal peptide (SEQ ID NO:2), a 112 amino acid IL-13 sequence (SEQ ID NO:3; amino acid substitution E13Y shown in bold); a 229 amino acid IgG4 sequence (SEQ ID NO:4; with amino acid substitutions L235E and N297Q shown in bold); a 22 amino acid CD4 transmembrane sequence (SEQ ID NO:5); a 42 amino acid 4-1BB sequence (SEQ ID NO:6); a 3 amino acid Gly linker; a 112 amino acid CD3ζ sequence 15 (SEQ ID NO:7); a 24 amino acid T2A sequence (SEQ ID NO:8); and a 323 amino acid CD19t sequence (SEQ ID NO:9). [0068] The mature chimeric antigen receptor sequence (SEQ ID NO:10) includes: a 112 amino acid IL-13 sequence (SEQ ID NO:3; amino acid substitution E13Y shown in bold); a 229 amino acid IgG4 sequence (SEQ ID NO:4; with amino acid substitutions L235E and N297Q shown in bold); at 22 amino acid CD4 sequence (SEQ ID NO:5); a 42 amino acid 4-1BB sequence (SEQ ID NO:6); a 3 amino acid Gly linker; and a 112 amino acid CD3ζ sequence (SEQ ID NO:7). Within this CAR sequence (SEQ ID NO:10) is the IL-13/lgG4/CD4t/41-BB sequence (SEQ ID NO:11), which includes: a 112 amino acid IL-13 sequence (SEQ ID NO:3; amino acid substitution E13Y shown in bold); a 229 amino acid IgG4 sequence (SEQ ID NO:4; with amino acid substitutions L235E and N297Q shown in bold); at 22 amino acid CD4 sequence (SEQ ID NO:5); and a 42 amino acid 4-1BB sequence (SEQ ID NO:6). The IL13/IgG4/CD4t/4-1BB sequence (SEQ ID NO:11) can be joined to the 112 amino acid CD3ζ sequence (SEQ ID NO:7) by a linker such as a Gly Gly Gly linker. The CAR sequence (SEQ ID NO:10) can be preceded by a 22 amino acid GMCSF signal peptide (SEQ ID NO:2). [0069] Figure 18 depicts a comparison of the sequences of IL13(EQ)41BBζ[IL13{EQ}41BBζ T2A-CD19t\_epHIV7; pF02630] (SEQ ID NO:12) and CD19Rop\_epHIV7 (pJ01683) (SEQ ID NO:13).

### 30 Example 12: Amino acid Sequence of IL13(EQ)BBζ/CD19t

[0070] Figures 19-26 depict the amino acid sequences of additional CAR directed against IL13R $\alpha$ 2 in each case the various domains are labelled except for the GlyGlyGly spacer located between certain intracellular domains. Each includes human IL13 with and Glu to Tyr (SEQ ID NO:3; amino acid substitution E13Y shown in highlighted). In the expression vector used to express these CAR, the amino acid sequence expressed can include a 24 amino acid T2A sequence (SEQ ID NO:8); and a 323 amino acid CD19t sequence (SEQ ID NO:9) to permit coordinated expression of a truncated CD19 sequence on the surface of CAR-expressing cells.

**[0071]** A panel of CAR comprising human IL13(E13Y) domain, a CD28 tm domain, a CD28gg costimulatory domain, a 4-1BB costimulatory domain, and a CD3ζ domain CAR backbone and including either a HL (22 amino acids) spacer, a CD8 hinge (48 amino acids) spacer, IgG4-HL-CH3 (129 amino acids) spacer or a IgG4(EQ) (229 amino acids) spacer were tested for their ability to mediate IL13Ra2-specific killing as evaluated in a 72-hour co-culture assay. With the exception of HL (22 amino acids) which appeared to have poor CAR expression in this system, all were active.

### **EMBODIMENTS**

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**[0072]** Although the present invention is defined in the attached claims, it should be understood that the present invention can also (alternatively) be defined in accordance with the following embodiments:

- 1. A nucleic acid molecule encoding a chimeric antigen receptor, wherein the chimeric antigen receptor comprises: human IL-13 or a variant thereof having 1-10 amino acid modifications; a transmembrane domain selected from: a CD4 transmembrane domain or variant thereof having 1-10 amino acid modifications, a CD8 transmembrane domain or variant thereof having 1-10 amino acid modifications, a CD28 transmembrane domain or a variant thereof having 1-10 amino acid modifications, and a CD3 $\zeta$  transmembrane domain or a variant thereof having 1-10 amino acid modifications; a costimulatory domain; and CD3  $\zeta$  signaling domain of a variant thereof having 1-10 amino acid modifications.
- 2. The nucleic acid molecule of embodiment 1 wherein the costimulatory domain is selected from the group consisting of: a CD28 costimulatory domain or a variant thereof having 1-10 amino acid modifications, a 4IBB costimulatory

domain or a variant thereof having 1-10 amino acid modifications and an OX40 costimulatory domain or a variant thereof having 1-10 amino acid modifications.

3. The nucleic acid molecule of embodiment 1 comprising a variant of a human IL13 having 1-10 amino acid modification that increase binding specificity for IL13R $\alpha$ 2 versus IL13R $\alpha$ 1.

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- 4. The nucleic acid molecule of embodiment 1 wherein the human IL-13 or variant thereof is an IL-13 variant comprising the amino acid sequence of SEQ ID NO:3 with 1 to 5 amino acid modifications, provided that the amino acid at position 11 of SEQ ID NO:3 other than E.
- 5. The nucleic acid molecule of embodiment 2 wherein the chimeric antigen receptor comprises two different costimulatory domains selected from the group consisting of: a CD28 costimulatory domain or a variant thereof having 1-10 amino acid modifications, a 4IBB costimulatory domain or a variant thereof having 1-10 amino acid modifications and an OX40 costimulatory domain or a variant thereof having 1-10 amino acid modifications.
- 6. The nucleic acid molecule of embodiment 5 wherein the chimeric antigen receptor comprises two different costimulatory domains selected from the group consisting of: a CD28 costimulatory domain or a variant thereof having 1-2 amino acid modifications, a 4IBB costimulatory domain or a variant thereof having 1-2 amino acid modifications and an OX40 costimulatory domain or a variant thereof having 1-2 amino acid modifications.
- 7. The nucleic acid molecule of embodiment 1 wherein the chimeric antigen receptor comprises: human IL-13 or a variant thereof having 1-2 amino acid modifications; a transmembrane domain selected from: a CD4 transmembrane domain or variant thereof having 1-2 amino acid modifications, a CD8 transmembrane domain or variant thereof having 1-2 amino acid modifications, a CD28 transmembrane domain or a variant thereof having 1-2 amino acid modifications; a costimulatory domain; and CD3  $\zeta$  signaling domain of a variant thereof having 1-2 amino acid modifications.
- 8. The nucleic acid molecule of embodiment 1 comprising a spacer region located between the IL-13 or variant thereof and the transmembrane domain.
- 9. The nucleic acid molecule of embodiment 6 wherein the spacer region comprises an amino acid sequence selected from the group consisting of SEQ ID NO: 4, 14-20, 50 and 521.
- 10. The nucleic acid molecule of embodiment 6 wherein the spacer comprises an IgG hinge region.
- 11. The nucleic acid molecule of embodiment 6 wherein the spacer comprises 10-150 amino acids.12. The nucleic acid molecule of embodiment 2 wherein the 4-1BB signaling domain comprises the amino acid
- sequence of SEQ ID NO:6.
- 13. The nucleic acid molecule of embodiment 1 wherein the CD3 $\zeta$  signaling domain comprises the amino acid sequence of SEQ ID NO:7.
- 14. The nucleic acid molecule of embodiment 1 wherein a linker of 3 to 15 amino acids is located between the costimulatory domain and the CD3  $\zeta$  signaling domain or variant thereof.
  - 15. The nucleic acid molecule of embodiment 1 wherein the nucleic acid molecule expresses a polypeptide comprising an amino acid sequence selected from SEQ ID NOs: 10, 31-48 and 52.
- 50 16. The nucleic acid molecule of embodiment 1 wherein the chimeric antigen receptor comprises a IL-13/IgG4/CD4t/41-BB region comprising the amino acid of SEQ ID NO:11 and a CD3 ζ signaling domain comprising the amino acid sequence of SEQ ID NO:7.
  - 17. The nucleic acid molecule of embodiment 14 wherein the chimeric antigen receptor comprises the amino acid sequence of SEQ ID NOs: 10, 31-48 and 52.
    - 18. A population of human T cells transduced by a vector comprising an expression cassette encoding a chimeric antigen receptor, wherein chimeric antigen receptor comprises: human IL-13 or a variant thereof having 1-10 amino

acid modifications; a transmembrane domain selected from: a CD4 transmembrane domain or variant thereof having 1-10 amino acid modifications, a CD8 transmembrane domain or variant thereof having 1-10 amino acid modifications, a CD28 transmembrane domain or a variant thereof having 1-10 amino acid modifications, and a CD3 $\zeta$  transmembrane domain or a variant thereof having 1-10 amino acid modifications; a costimulatory domain; and CD3 $\zeta$  signaling domain of a variant thereof having 1-10 amino acid modifications.

- 19. A population of human T cells comprising a vector expressing a chimeric antigen receptor comprising an amino acid sequence selected from SEQ ID NOs: 10, 31-48 and 52.
- 20. The population of human T cells of embodiment 16 wherein the T cells are comprised of a population of central memory T cells.
  - 21. A method of treating cancer in a patient comprising administering a population of autologous or allogeneic human T cells transduced by a vector comprising an expression cassette encoding a chimeric antigen receptor, wherein chimeric antigen receptor comprises an amino acid sequence selected from SEQ ID NOs: 10, 31-48 and 52.
  - 22. The method of embodiment 19 wherein the population of human T cells comprise central memory T cells.
  - 23. The method embodiment 19 wherein the cancer is glioblastoma.

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- 24. The method of embodiment 20 wherein the transduced human T cells where prepared by a method comprising obtaining T cells from the patient, treating the T cells to isolate central memory T cells, and transducing at least a portion of the central memory cells to with a viral vector comprising an expression cassette encoding a chimeric antigen receptor, wherein chimeric antigen receptor comprises an amino acid sequence selected from SEQ ID NOs: 10, 31-48 and 52.
- 25. A nucleic acid molecule encoding an polypeptide comprising an amino acid sequence that is at least 95% identical to an amino acid sequence selected from SEQ ID NO:10 and SEQ ID NOs: 10, 31-48 and 52.
- 26. A nucleic acid molecule encoding an polypeptide comprising an amino acid sequence that is identical to an amino acid sequence selected from SEQ ID NO: 10, 31-48 and 52 except for the presence of no more than 5 amino acid substitutions, deletions or insertions.
  - 27. A nucleic acid molecule encoding an polypeptide comprising an amino acid sequence that is identical to an amino acid sequence selected from SEQ ID NO:10 and SEQ ID NOs: 10, 31-48 and 52 except for the presence of no more than 5 amino acid substitutions.
  - 28. A nucleic acid molecule encoding an polypeptide comprising an amino acid sequence that is identical to an amino acid sequence selected from SEQ ID NO:10 and SEQ ID NOs: 10, 31-48 and 52 except for the presence of no more than 2 amino acid substitutions.

19

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35	Claims													
	1. A chimeric	antigen rece	ptor compr	ising										
40	that the (ii) a tra acid su	e amino acid ansmembran bstitutions, a	at position le domain s CD8 trans	11 of S elected membra	EQ ID from: a ane do	NO: 3 a CD4 main o	is an transr r varia	amino nembr nt ther	acid of acid o	other tomain ving 1	han E or vari -5 ami	; ant the no acid	ereof h	tutions, provided aving 1-5 amino titutions, a CD28 transmembrane
45	domair (iii) a c thereof acid sul	n or a variant ostimulatory having 1-5	t thereof ha domain se amino acid nd an OX40	ving 1-8 lected f substitu costimu	o amino from the tions, a ulatory	o acid e grou a 4IBB domai	substi up con costir n or a v	tutions sisting nulato /ariant	s; g of: a ry don there	CD28 nain or of havi	costir a vari ng 1-5	mulato ant the amino	ry don ereof h	nain or a variant aving 1-5 amino ubstitutions; and
50	(11) 3D	o.g. idig	Lomain of				y '	5 amm	401					

- 2. The chimeric antigen receptor of claim 1, wherein the binding domain comprises SEQ ID NO: 3, the transmembrane domain comprises a CD4 transmembrane domain, the costimulatory domain comprises a 41BB costimulatory domain, and the CD3 $\zeta$  signaling domain is not a variant.
- **3.** The chimeric antigen receptor of claim 1 or 2, wherein the chimeric antigen receptor comprises SEQ ID NO: 10.
  - 4. The chimeric antigen receptor according to any one of claims 1-3 further comprising a GMSCFRa signal sequence.

- 5. The chimeric antigen receptor of claim 5, wherein the GMSCFRa signal sequence comprises SEQ ID NO: 2.
- 6. The chimeric antigen receptor according to any one of claims 1-5 further comprising a T2A ribosome skip.
- The chimeric antigen receptor of claim 6, wherein T2A ribosome skip sequence comprises SEQ ID NO: 8.
  - 8. The chimeric antigen receptor according to any one of claims 1-7 further comprising a truncated CD 19.
  - 9. The chimeric antigen receptor of claim 8, wherein the truncated CD19 comprises SEQ IE NO: 9.
  - 10. A population of human T cells that express the chimeric antigen receptor according to any one of claims 1-9.
  - 11. The population of human T cells of claim 10, wherein the T cells comprise central memory T cells.
- **12.** A composition for use in treating cancer in a patient, the composition comprising the population of human T cells according to claim 10 or 11.
  - 13. The composition of claim 12, wherein the human T cells are autologous to the patient.
- 20 **14.** The composition of claim 12, wherein the human T cells are allogeneic to the patient.

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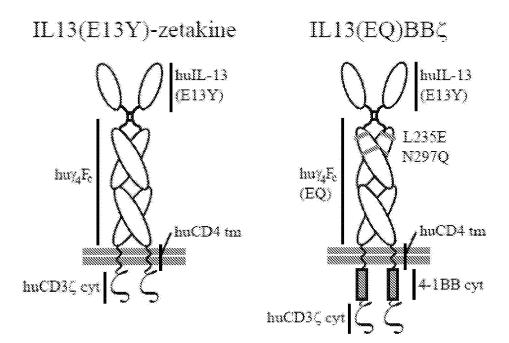
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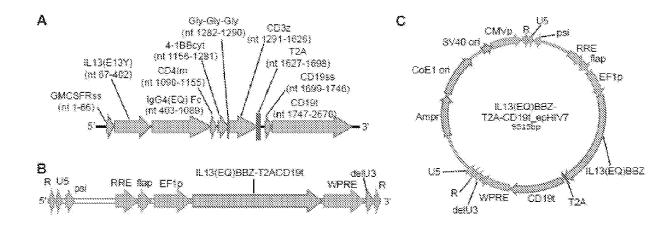
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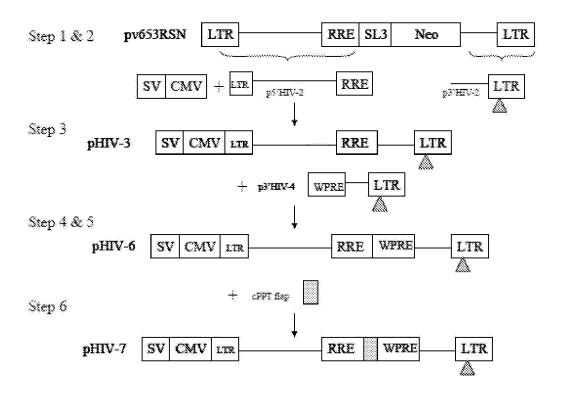
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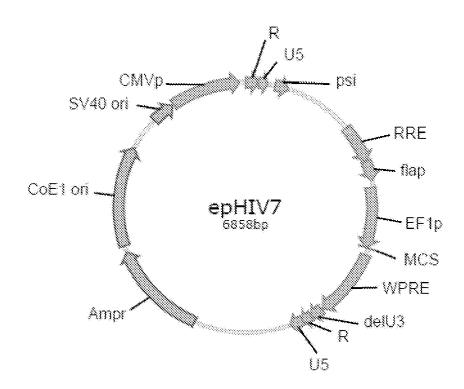
15. The composition according to any one of claims 12-14, wherein the cancer is glioblastoma.

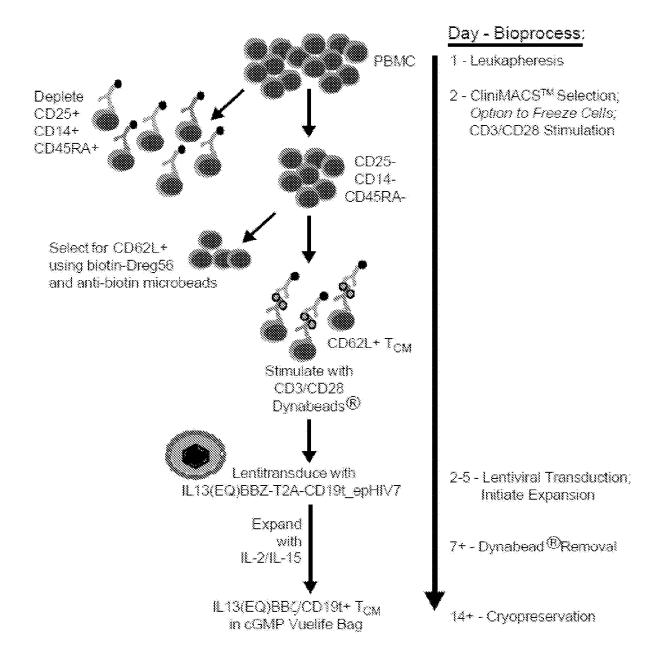
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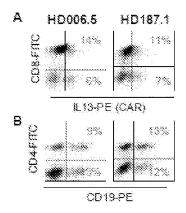


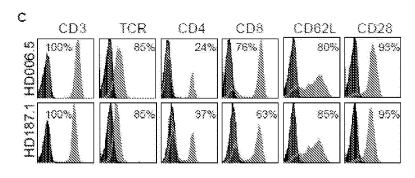


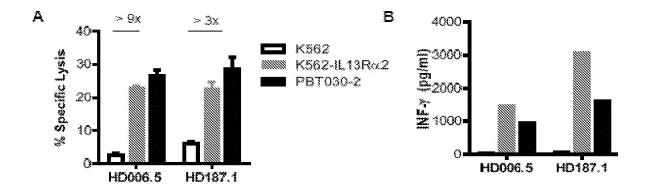


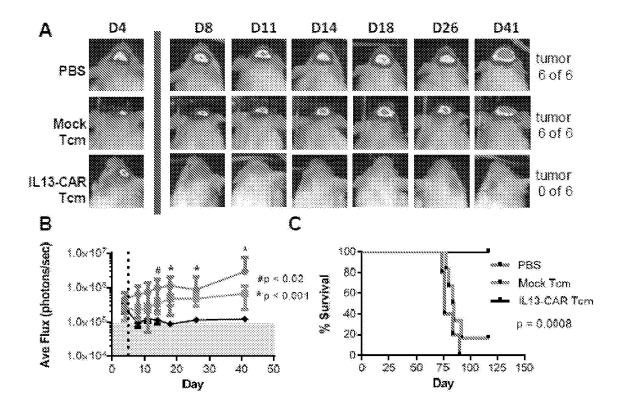


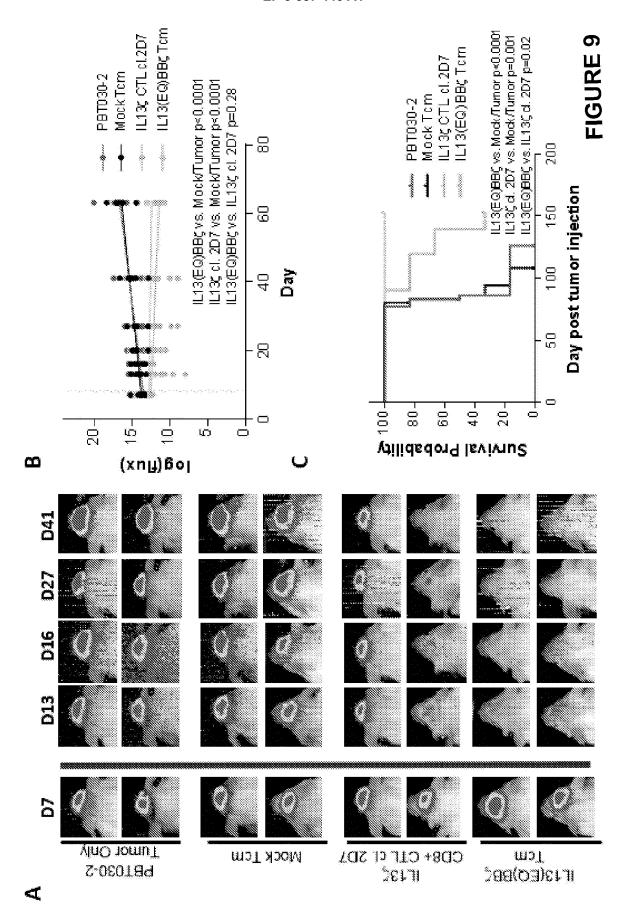


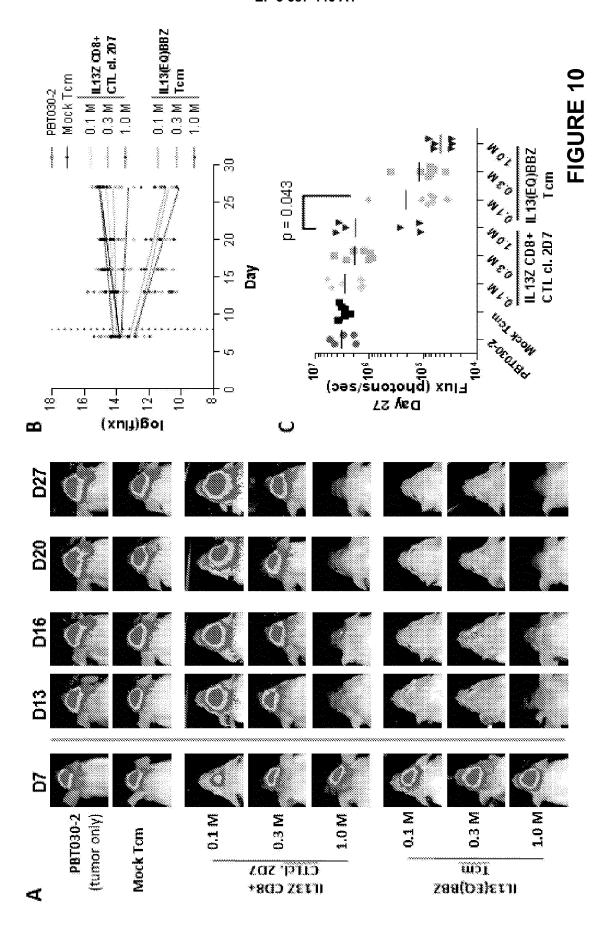


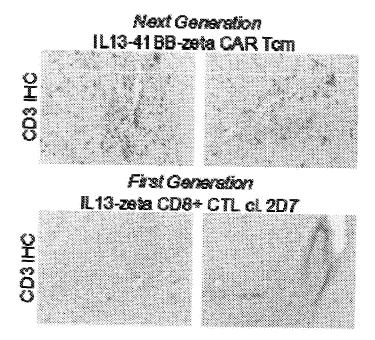


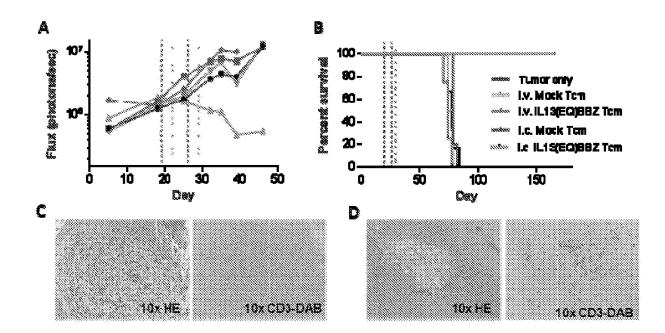


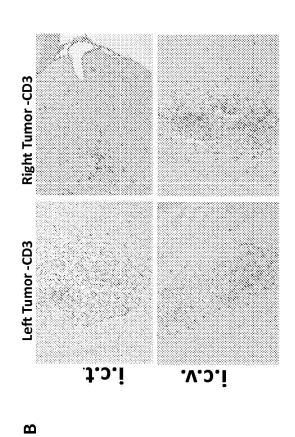


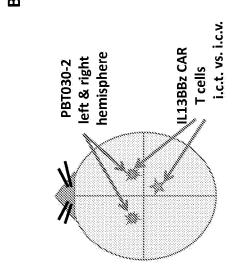












4

FIGURE 13

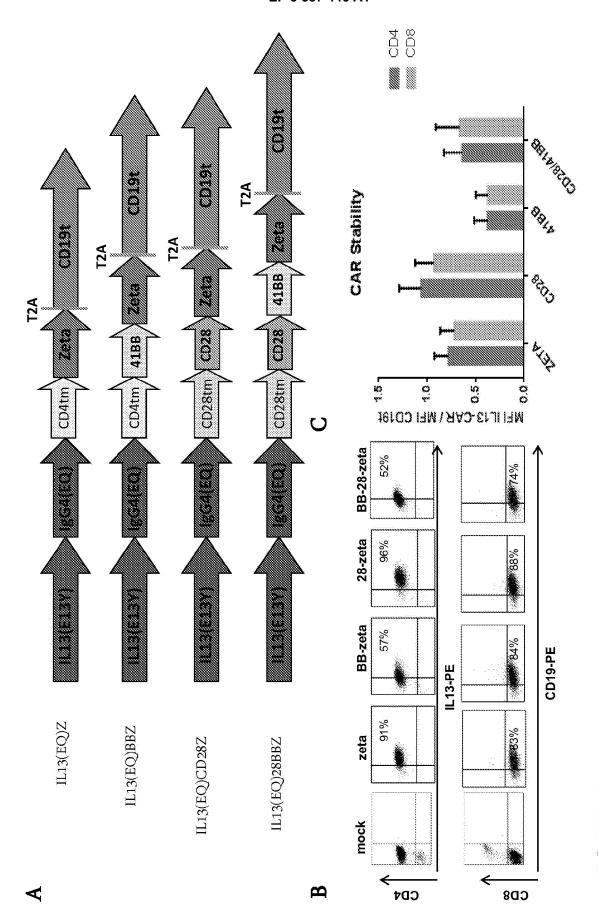
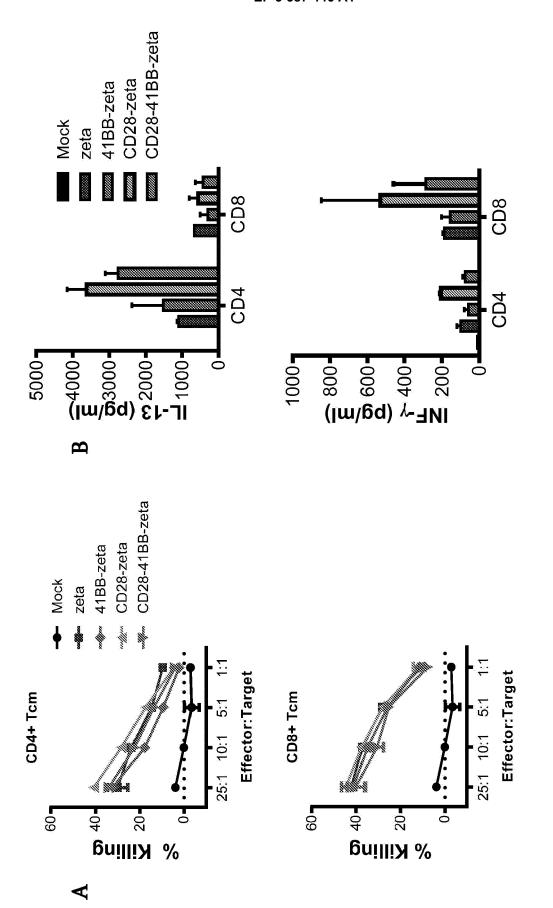
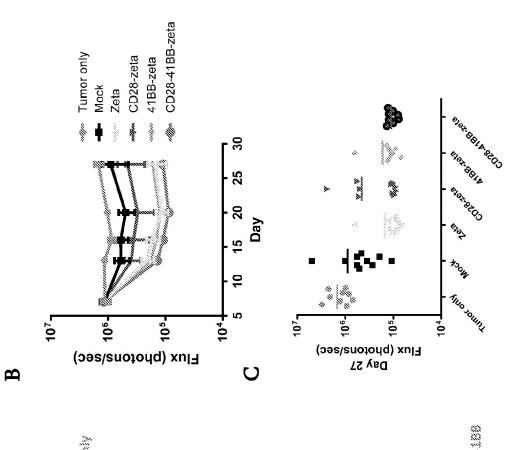


FIGURE 14



101



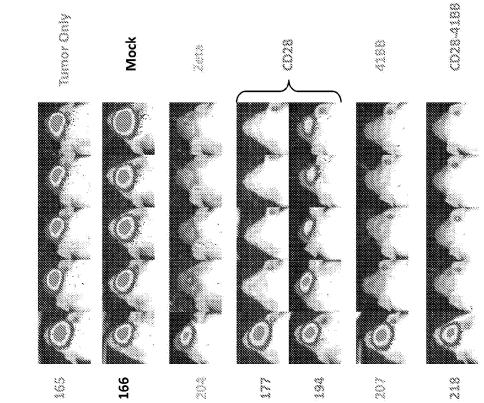


FIGURE 16

MLLLVTSLLLCELPHPAFLLIPGPVPPSTALRYLIEELVNITQNQKAPLCNGSMVWSINLTAG	<u>3M</u>
GMCSFRa signal peptide (22 aa) IL13 (112 aa)	
VCA ALECLINIVESCES ALEKTORALI SELECTIVIVEA COESCILIIVERTIVIEVA OEVIVERILI LILIVIV	9 -
YCAALESLINVSGCSAIEKTQRMLSGFCPHKVSAGQFSSLHVRDTKIEVAQFVKDLLLHLKK	LL

REGRFNESKYGPPCPAPEFEGGPSVFLFPPKPKDTLMISRTPEVTCVVVDVSQEDPEVQF

lgG4(L235E, N297Q in bold) (229 aa)

<u>NWYVDGVEVHNAKTKPREEQFQSTYRVVSVLTVLHQDWLNGKEYKCKVSNKGLPSSIEKTIS</u>

KAKGQPREPQVYTLPPSQEEMTKNQVSLTCLVKGFYPSDIAVEWESNGQPENNYKTTPPVL

<u>DSDGSFFLYSRLTVDKSRWQEGNVFSCSVMHEALHNHYTQKSLSLSLGKMALIVLGGVAGLL</u>

<u>CD4tm (22 aa)</u>

LFIGLGIFFKRGRKKLLYIFKQPFMRPVQTTQEEDGCSCRFPEEEEGGCELGGGRVKFSRSADA

41BB (42 aa)

Gly3 Zeta (112 aa)

<u>PAYQQGQNQLYNELNLGRREEYDVLDKRRGRDPEMGGKPRRKNPQEGLYNELQKDKMAE</u>

<u>AYSEIGMKGERRRGKGHDGLYQGLSTATKDTYDALHMQALPPRLEGGGEGRGSLLTCGDV</u>

<u>T2A (24 aa)</u>

<u>EENPGPRMPPPRLLFFLLFLTPMEVRPEEPLVVKVEEGDNAVLQCLKGTSDGPTQQLTWSRE</u>

<u>CD19t (323 aa)</u>

<u>SPLKPFLKLSLGLPGLGIHMRPLAIWLFIFNVSQQMGGFYLCQPGPPSEKAWQPGWTVNVE</u>
<u>GSGELFRWNVSDLGGLGCGLKNRSSEGPSSPSGKLMSPKLYVWAKDRPEIWEGEPPCVPPR</u>
DSLNQSLSQDLTMAPGSTLWLSCGVPPDSVSRGPLSWTHVHPKGPKSLLSLELKDDRPARD
MWVMETGLLLPRATAQDAGKYYCHRGNLTMSFHLEITARPVLWHWLLRTGGWKVSAVTL
AYLIFCLCSLVGILHLQRALVLRRKR

Yellow highlighting indicates the IL-13 optimized codon region including the GMCSF signal sequence (IL13op).

highlighting indicates the IgG4 optimized codon region (IgG4op[L235E, N297Q]).

highlighting indicates the two anticipated amino acid changes within the IgG4 hinge region (L235E and N297Q).

highlighting indicates the CD4 transmembrane optimized codon region. highlighting indicates the 41BB cytoplasmic signaling region (41BB cyto).

highlighting indicates the 3 glycine linkers (g3).

Gray Highlighting indicates the CD3 zeta optimized codon region (zeta op). highlighting indicates the T2A sequence (T2A).

highlighting Indicates the truncated CD19 sequence (CD19t).

		1 50
IL13(EQ)41BBZeta	(1)	GTTAGACCAGATCTGAGCCTGGGAGCTCTCTGGCTAACTAGGGAACCCAC
CD19Rop epHIV7	(1)	GTTAGACCAGATCTGAGCCTGGGAGCTCTCTGGCTAACTAGGGAACCCAC
Consensus	(1)	GTTAGACCAGATCTGAGCCTGGGAGCTCTCTGGCTAACTAGGGAACCCAC
		51 100
IL13(EQ)41BBZeta	(51)	TGCTTAAGCCTCAATAAAGCTTGCCTTGAGTGCTTCAAGTAGTGTGTGCC
CD19Rop_epHIV7	(51)	TGCTTAAGCCTCAATAAAGCTTGCCTTGAGTGCTTCAAGTAGTGTGTGCC
Consensus	(51)	TGCTTAAGCCTCAATAAAGCTTGCCTTGAGTGCTTCAAGTAGTGTGTGCC 101 150
IL13(EQ)41BBZeta	(101)	CGTCTGTTGTGACTCTGGTAACTAGAGATCCCTCAGACCCTTTTAGTC
CD19Rop epHIV7	(101)	CGTCTGTTGTGTGACTCTGGTAACTAGAGATCCCTCAGACCCTTTTAGTC
Consensus	(101)	CGTCTGTTGTGACTCTGGTAACTAGAGATCCCTCAGACCCTTTTAGTC 151 200
IL13 (EO) 41BBZeta	(151)	AGTGTGGAAAATCTCTAGCAGTGGCGCCCGAACAGGGACTTGAAAGCGAA
CD19Rop epHIV7	(151)	AGTGTGGAAAATCTCTAGCAGTGGCGCCCGAACAGGGACTTGAAAGCGAA
Consensus	(151)	AGTGTGGAAAATCTCTAGCAGTGGCGCCCGAACAGGGACTTGAAAGCGAA
Compensus	(121)	201 250
IL13(EQ)41BBZeta	(201)	AGGGAAACCAGAGGACTCTCTCGACGCAGGACTCGGCTTGCTGAAGCGC
CD19Rop_epHIV7	(201)	AGGGAAACCAGAGGACTCTCTCGACGCAGGACTCGGCTTGCTGAAGCGC
Consensus	(201)	AGGGAAACCAGAGGAGCTCTCTCGACGCAGGACTCGGCTTGCTGAAGCGC 251 300
IL13(EQ)41BBZeta	(251)	GCACGGCAAGAGGCGAGGGGGGGGGGGGGGGGGGGGGGG
CD19Rop epHIV7	(251)	GCACGGCAAGAGGCGAGGGGGGGGGGGGGGGGGGGGGGG
Consensus	(251)	GCACGGCAAGAGGCGAGGGGGGGGGGGGGGGGGGGGGG
IL13(EQ)41BBZeta	(301)	ACTAGCGGAGGCTAGAAGGAGAGAGATGGGTGCGAGAGCGTCAGTATTAA
CD19Rop epHIV7	(301)	ACTAGCGGAGGCTAGAAGGAGAGAGTGGGTGCGAGAGCGTCAGTATTAA
Consensus	(301)	ACTAGCGGAGGCTAGAAGGAGAGAGATGGGTGCGAGAGCGTCAGTATTAA
00110011000	(002)	351 400
IL13(EQ)41BBZeta	(351)	GCGGGGGAAATTAGATCGATGGGAAAAAATTCGGTTAAGGCCAGGGGGA
CD19Rop_epHIV7	(351)	GCGGGGGAAATTAGATCGATGGGAAAAAATTCGGTTAAGGCCAGGGGGA
Consensus	(351)	GCGGGGGAAATTAGATCGATGGGAAAAAATTCGGTTAAGGCCAGGGGGA 401 450
IL13(EQ)41BBZeta	(401)	AAGAAAAATATAAATTAAAACATATAGTATGGGCAAGCAGGGAGCTAGA
CD19Rop_epHIV7	(401)	AAGAAAAATATAAATTAAAACATATAGTATGGGCAAGCAGGGAGCTAGA
Consensus	(401)	AAGAAAAATATAAATTAAAACATATAGTATGGGCAAGCAGGGAGCTAGA 451 500

IL13(EQ)41BBZeta	(451)	ACGATTCGCAGTTAATCCTGGCCTGTTAGAAACATCAGAAGGCTGTAGAC
CD19Rop epHIV7	(451)	ACGATTCGCAGTTAATCCTGGCCTGTTAGAAACATCAGAAGGCTGTAGAC
Consensus	(451)	ACGATTCGCAGTTAATCCTGGCCTGTTAGAAACATCAGAAGGCTGTAGAC
		501 550
IL13(EO)41BBZeta	(501)	AAATACTGGGACAGCTACAACCATCCCTTCAGACAGGATCAGAAGAACTT
CD19Rop epHIV7	(501)	AAATACTGGGACAGCTACAACCATCCCTTCAGACAGGATCAGAAGAACTT
Consensus	(501)	AAATACTGGGACAGCTACAACCATCCCTTCAGACAGGATCAGAAGAACTT
Consensus	(301)	
	/EE3 V	551 600
IL13 (EQ) 41BBZeta	(551)	AGATCATTATATACAGTAGCAACCCTCTATTGTGTGCATCAAAGGAT
CD19Rop_epHIV7	(551)	AGATCATTATATAATACAGTAGCAACCCTCTATTGTGTGCATCAAAGGAT
Consensus	(551)	AGATCATTATATAATACAGTAGCAACCCTCTATTGTGTGCATCAAAGGAT
		601 650
IL13(EQ)41BBZeta	(601)	AGAGATAAAAGACACCAAGGAAGCTTTAGACAAGATAGAGGAAGAGCAAA
CD19Rop epHIV7	(601)	AGAGATAAAAGACACCAAGGAAGCTTTAGACAAGATAGAGGAAGAGCAAA
Consensus	(601)	AGAGATAAAAGACACCAAGGAAGCTTTAGACAAGATAGAGGAAGAGCAAA
Conscissas	(001)	651 700
IL13 (EQ) 41BBZeta	(651)	
	**************************************	ACAAAAGTAAGAAAAAAGCACAGCAAGCAGCAGCTGACACAGGACACAGC
CD19Rop_epHIV7	(651)	ACAAAAGTAAGAAAAAAGCACAGCAAGCAGCTGACACAGGACACAGC
Consensus	(651)	ACAAAAGTAAGAAAAAGCACAGCAAGCAGCTGACACAGGACACAGC
		701 750
IL13(EQ)41BBZeta	(701)	AATCAGGTCAGCCAAAATTACCCTATAGTGCAGAACATCCAGGGGCAAAT
CD19Rop epHIV7	(701)	AATCAGGTCAGCCAAAATTACCCTATAGTGCAGAACATCCAGGGGCAAAT
Consensus	(701)	AATCAGGTCAGCCAAAATTACCCTATAGTGCAGAACATCCAGGGGCAAAT
00115011500	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	751 800
IL13 (EQ) 41BBZeta	(751)	GGTACATCAGGCCATATCACCTAGAACTTTAAATGCATGGGTAAAAGTAG
CD19Rop_epHIV7	(751)	GGTACATCAGGCCATATCACCTAGAACTTTAAATGCATGGGTAAAAGTAG
Consensus	(751)	GGTACATCAGGCCATATCACCTAGAACTTTAAATGCATGGGTAAAAGTAG
		801 850
IL13 (EQ) 41BBZeta	(801)	TAGAAGAGAAGGCTTTCAGCCCAGAAGTGATACCCATGTTTTCAGCATTA
CD19Rop epHIV7	(801)	TAGAAGAGAAGCTTTCAGCCCAGAAGTGATACCCATGTTTTCAGCATTA
Consensus	(801)	TAGAAGAGAAGGCTTTCAGCCCAGAAGTGATACCCATGTTTTCAGCATTA
		851 900
IL13 (EQ) 41BBZeta	(851)	TCAGAAGGAGCCACCCCACAAGATTTAAACACCATGCTAAACACAGTGGG
CD19Rop epHIV7	(851)	TCAGAAGGAGCCACCCCACAAGATTTAAACACCATGCTAAACACAGTGGG
Consensus	(851)	TCAGAAGGAGCCACCCCACAAGATTTAAACACCATGCTAAACACAGTGGG
Consensus	(OOT)	
	warana a	901 950
IL13(EQ)41BBZeta	(901)	GGGACATCAAGCAGCCATGCAAATGTTAAAAGAGACCATCAATGAGGAAG
CD19Rop_epHIV7	(901)	GGGACATCAAGCAGCCATGCAAATGTTAAAAGAGACCATCAATGAGGAAG
Consensus	(901)	GGGACATCAAGCAGCCATGCAAATGTTAAAAGAGACCATCAATGAGGAAG
		951 1000
IL13(EQ)41BBZeta	(951)	CTGCAGGCAAAGAGAGAGTGGTGCAGAGAGAAAAAAGAGCAGTGGGAAT
CD19Rop epHIV7	(951)	CTGCAGGCAAAGAGAGAGTGGTGCAGAGAGAAAAAAGAGCAGTGGGAAT
Consensus	(951)	CTGCAGGCAAAGAGAGAGTGGTGCAGAGAGAAAAAAGAGCAGTGGGAAT
Consensus	(331)	1001 1050
TT 12 (FO) 41 PDF - L -	/1 001 Y	
IL13 (EQ) 41BBZeta	(1001)	AGGAGCTTTGTTCCTTGGGTTCTTGGGAGCAGCAGGAAGCACTATGGGCG
CD19Rop_epHIV7	(1001)	AGGAGCTTTGTTCCTTGGGTTCTTGGGAGCAGCAGGAAGCACTATGGGCG
Consensus	(1001)	AGGAGCTTTGTTCCTTGGGTTCTTGGGAGCAGCAGGAAGCACTATGGGCG
		1051 1100
IL13(EQ)41BBZeta	(1051)	CAGCGTCAATGACGCTGACGGTACAGGCCAGACAATTATTGTCTGGTATA
CD19Rop epHIV7	(1051)	CAGCGTCAATGACGCTGACGGTACAGGCCAGACAATTATTGTCTGGTATA
Consensus	(1051)	CAGCGTCAATGACGCTGACGGTACAGGCCAGACAATTATTGTCTGGTATA
	1-20-1	1101 1150
IL13 (EQ) 41BBZeta	(1101)	GTGCAGCAGCAGAACAATTTGCTGAGGGCTATTGAGGCGCAACAGCATCT
CD19Rop_epHIV7	(1101)	GTGCAGCAGCAGAACAATTTGCTGAGGGCTATTGAGGCGCAACAGCATCT
Consensus	(1101)	GTGCAGCAGAACAATTTGCTGAGGGCTATTGAGGCGCAACAGCATCT

		1151 1200
IL13(EQ)41BBZeta	(1151)	GTTGCAACTCACAGTCTGGGGCATCAAGCAGCTCCAGGCAAGAATCCTGG
CD19Rop_epHIV7	(1151)	GTTGCAACTCACAGTCTGGGGCATCAAGCAGCTCCAGGCAAGAATCCTGG
Consensus	(1151)	GTTGCAACTCACAGTCTGGGGCATCAAGCAGCTCCAGGCAAGAATCCTGG
		1201 1250
IL13 (EQ) 41BBZeta	(1201)	CTGTGGAAAGATACCTAAAGGATCAACAGCTCCTGGGGATTTGGGGTTGC
CD19Rop_epHIV7	(1201)	CTGTGGAAAGATACCTAAAGGATCAACAGCTCCTGGGGATTTGGGGTTGC
Consensus	(1201)	CTGTGGAAAGATACCTAAAGGATCAACAGCTCCTGGGGATTTGGGGTTGC
TT 10 (FO) 14 DDT 1	410E1	1251 1300
IL13 (EQ) 41BBZeta	(1251) (1251)	TCTGGAAAACTCATTTGCACCACTGCTGTGCCTTGGATCTACAAATGGCA
CD19Rop_epHIV7 Consensus	(1251) $(1251)$	TCTGGAAAACTCATTTGCACCACTGCTGTGCCTTGGATCTACAAATGGCA TCTGGAAAACTCATTTGCACCACTGCTGTGCCTTGGATCTACAAATGGCA
Consensus	(1201)	1301 1350
IL13 (EO) 41BBZeta	(1301)	GTATTCATCCACAATTTTAAAAGAAAAGGGGGGGATTGGGGGGTACAGTGC
CD19Rop epHIV7	(1301)	GTATTCATCCACAATTTTAAAAGAAAAGGGGGGGATTGGGGGGGTACAGTGC
Consensus	(1301)	GTATTCATCCACAATTTTAAAAGAAAAGGGGGGGATTGGGGGGGTACAGTGC
	,	1351 1400
IL13 (EQ) 41BBZeta	(1351)	AGGGGAAAGAATAGTAGACATAATAGCAACAGACATACAAACTAAAGAAT
CD19Rop_epHIV7	(1351)	AGGGGAAAGAATAGTAGACATAATAGCAACAGACATACAAACTAAAGAAT
Consensus	(1351)	AGGGGAAAGAATAGTAGACATAATAGCAACAGACATACAAACTAAAGAAT
		1401 1450
IL13 (EQ) 41BBZeta	(1401)	TACAAAAACAAATTACAAAAATTCAAAATTTTCGGGTTTATTACAGGGAC
CD19Rop_epHIV7	(1401)	TACAAAAACAAATTACAAAAATTCAAAATTTTCGGGTTTATTACAGGGAC
Consensus	(1401)	TACAAAAACAAATTACAAAAATTCAAAATTTTCGGGTTTATTACAGGGAC 1451 1500
IL13(EQ)41BBZeta	(1451)	AGCAGAGATCCAGTTTGGGGATCAATTGCATGAAGAATCTGCTTAGGGTT
CD19Rop_epHIV7	(1451)	AGCAGAGATCCAGTTTGGGGATCAATTGCATGAAGAATCTGCTTAGGGTT
Consensus	(1451)	AGCAGAGATCCAGTTTGGGGATCAATTGCATGAAGAATCTGCTTAGGGTT 1501 1550
IL13 (EQ) 41BBZeta	(1501)	AGGCGTTTTGCGCTGCTTCGCGAGGATCTGCGATCGCTCCGGTGCCCGTC
CD19Rop_epHIV7	(1501)	AGGCGTTTTGCGCTGCCTCCGGAGGATCTGCGATCGCTCCGGTGCCCGTC
Consensus	(1501)	AGGCGTTTTGCGCTGCTTCGCGAGGATCTGCGATCGCTCCGGTGCCCGTC 1551 1600
IL13(EQ)41BBZeta	(1551)	AGTGGGCAGAGCGCACATCGCCCACAGTCCCCGAGAAGTTGGGGGGAGGG
CD19Rop_epHIV7	(1551)	AGTGGGCAGAGCGCACATCGCCCACAGTCCCCGAGAAGTTGGGGGGAGGG
Consensus	(1551)	AGTGGGCAGAGCGCACATCGCCCACAGTCCCCGAGAAGTTGGGGGGAGGG
		1601 1650
IL13 (EQ) 41BBZeta	(1601)	GTCGGCAATTGAACCGGTGCCTAGAGAAGGTGGCGCGGGGTAAACTGGGA
CD19Rop_epHIV7	(1601)	GTCGGCAATTGAACCGGTGCCTAGAGAAGGTGGCGCGGGGTAAACTGGGA
Consensus	(1601)	GTCGGCAATTGAACCGGTGCCTAGAGAAGGTGGCGCGGGGTAAACTGGGA
TT 12 /EO\ //1007 a+a	(1651)	1651 1700 AAGTGATGTCGTGTACTGGCTCCGCCTTTTTCCCGAGGGTGGGGGGAGAAC
IL13(EQ)41BBZeta CD19Rop epHIV7	(1651)	AAGTGATGTCGTGTACTGGCTCCGCCTTTTTCCCGAGGGTGGGGGGAGAAC
Consensus	(1651)	AAGTGATGTCGTGTACTGGCTCCGCCTTTTTCCCGAGGGTGGGGGAGAAC
Compensas	(1001)	1701 1750
IL13 (EQ) 41BBZeta	(1701)	CGTATATAAGTGCAGTAGTCGCCGTGAACGTTCTTTTTCGCAACGGGTTT
CD19Rop epHIV7	(1701)	CGTATATAAGTGCAGTAGTCGCCGTGAACGTTCTTTTTCGCAACGGGTTT
Consensus	(1701)	CGTATATAAGTGCAGTAGTCGCCGTGAACGTTCTTTTTCGCAACGGGTTT 1751 1800
IL13 (EQ) 41BBZeta	(1751)	GCCGCCAGAACACAGCTGAAGCTTCGAGGGGCTCGCATCTCTCCTTCACG
CD19Rop epHIV7	(1751)	GCCGCCAGAACACAGCTGAAGCTTCGAGGGGCTCGCATCTCTCCTTCACG
Consensus	(1751)	GCCGCCAGAACACAGCTGAAGCTTCGAGGGGCTCGCATCTCTCCTTCACG 1801 1850
IL13 (EQ) 41BBZeta	(1801)	CGCCCGCCCTACCTGAGGCCGCCATCCACGCCGGTTGAGTCGCGTTC
CD19Rop_epHIV7	(1801)	CGCCGCCGCCTACCTGAGGCCGCCATCCACGCCGGTTGAGTCGCGTTC

	(1.001.)	
Consensus	(1801)	CGCCCGCCGCCTACCTGAGGCCGCCATCCACGCCGGTTGAGTCGCGTTC 1851 1900
IL13 (EQ) 41BBZeta	(1851)	TGCCGCCTCCCGCCTGTGGTGCCTCCTGAACTGCGTCCGCCGTCTAGGTA
CD19Rop epHIV7	(1851)	TGCCGCCTCCGGCCTGTGGTGCCTCCTGAACTGCGTCCGCCGTCTAGGTA
Consensus	(1851)	TGCCGCCTCCGCCTGTGGTGCCTCCTGAACTGCGTCCGCCGTCTAGGTA
		1901 1950
IL13 (EQ) 41BBZeta	(1901)	AGTTTAAAGCTCAGGTCGAGACCGGGCCTTTGTCCGGCGCTCCCTTGGAG
CD19Rop epHIV7	(1901)	AGTTTAAAGCTCAGGTCGAGACCGGGCCTTTGTCCGGCGCTCCCTTGGAG
Consensus	(1901)	AGTTTAAAGCTCAGGTCGAGACCGGGCCTTTGTCCGGCGCTCCCTTGGAG
		1951 2000
IL13(EQ)41BBZeta	(1951)	CCTACCTAGACTCAGCCGGCTCTCCACGCTTTGCCTGACCCTGCTTGCT
CD19Rop_epHIV7	(1951)	CCTACCTAGACTCAGCCGGCTCTCCACGCTTTGCCTGACCCTGCTTGCT
Consensus	(1951)	CCTACCTAGACTCAGCCGGCTCTCCACGCTTTGCCTGACCCTGCTTGCT
		2001 2050
IL13(EQ)41BBZeta	(2001)	
CD19Rop_epHIV7	(2001)	AACTCTACGTCTTTGTTTCGTTTTCTGTTCTGCGCCGTTACAGATCCAAG
Consensus	(2001)	AACTCTACGTCTTTGTTTCGTTTTCTGTTCTGCGCCGTTACAGATCCAAG
		2051 2100
IL13(EQ)41BBZeta	(2051)	CTGTGACCGGCGCCTACGGCTAGCGCCGCCACCATGCTGCTGCTGAC
CD19Rop_epHIV7	(2051)	CTGTGACCGGCCTACGGCTAGCGCCACCATGCTGCTGCTGAC
Consensus	(2051)	CTGTGACCGGCGCTACGGCTAGCGCCCCCCATGCTGCTGCTGAC
	and an artist of	2101 2150
IL13(EQ)41BBZeta	(2101)	CAGCCTGCTGCTGCGAGCTGCCCCACCCGCCTTTCTGCTGATCCCTG
CD19Rop_epHIV7	(2101)	CAGCCTGCTGTGCGAGCTGCCCCACCCGCCTTTCTGCTGATCCCCG
Consensus	(2101)	CAGCCTGCTGCTGCGAGCTGCCCCACCCCGCCTTTCTGCTGATCCC G 2151 2200
IL13 (EQ) 41BBZeta	(2151)	
CD19Rop_epHIV7	(2151)	ACATCCAGATGACCCAGACCACCTCCAGCCTGAGCGCCAGCCTGGGCGAC
Consensus	(2151)	C CC G TG CCC A CACC CC CTG GC C T G GA
		2201 2250
IL13 (EQ) 41BBZeta	(2195)	CTGGTGAACATCACCCAGAACCAGAA
CD19Rop_epHIV7	(2201)	CGGGTGACCATCAGCTGCCGGGCCAGCCAGGACATCAGCAAGTACCTGAA
Consensus	(2201)	C GGTGA ACATCA C AG ACC GAA
## 1 0 /P01 / 100 P = 1 1	400011	2251 2300
IL13 (EQ) 41BBZeta	(2221)	CTGTGCAAC
CD19Rop_epHIV7	(2251)	CTGGTATCAGCAGAAGCCCGACGGCACCGTCAAGCTGCTGATCTACCACA AGCCC CC CTG C AC
Consensus	(2251)	2301 2350
IL13(EO)41BBZeta	(2237)	
CD19Rop epHIV7	(2301)	CCAGCCGGCTGCACAGCGGCGTGCCCAGCCGGTTTAGCGGCAGCGGCTCC
Consensus	(2301)	GGC GCA GG GTG
Consensus	(ZJOI)	2351 2400
IL13 (EQ) 41BBZeta	(2251)	GAGCATCAACCTG
CD19Rop epHIV7		GGCACCGACTACAGCCTGACCATCTCCAACCTGGAACAGGAAGATATCGC
Consensus	(2351)	GA CATC AACCTG
	X	2401 2450
IL13 (EQ) 41BBZeta	(2264)	
CD19Rop epHIV7	(2401)	CACCTACTTTTGCCAGCAGGGCAACACACTGCCCTACACCTTTGGCGGGG
Consensus	(2401)	
		2451 2500
IL13(EQ)41BBZeta	(2288)	CTGGAAAGCCTGATCAACGTGAGCGGCT
IL13 (EQ) 41BBZeta CD19Rop_epHIV7		CTGGAAAGCCTGATCAACGTGAGCGGCTGAACAAAGCTGGAAATCACCGGCAGCACCTCCGGCAGCGGCAAGCCTGGC
CD19Rop_epHIV7	(2451) (2451)	${\tt GAACAAAGCTGGAAATCACCGGCAGCACCTCCGGCAGCGGCAAGCCTGGC}$

CD19Rop_epHIV7 Consensus	(2501) (2501)	AGCGGCGAGGCACCAAGGGCGAGGTGAAGCTGCAGGAAAGCGGCCC GCAGC CCA G AG AAA
TE 1 0 (DO) 41 DDF - + -	(2.2.2.4.)	2551 2600
IL13 (EQ) 41BBZeta CD19Rop_epHIV7 Consensus	(2334) (2551) (2551)	TGGCCTGGTGGCCCCAGCCAGAGCCTGAGCGTGACCTGCACCGTGAGCG
		2601 2650
IL13(EQ)41BBZeta	(2341)	GATGCTGTCCGGCTTCTGCCCCCACAAG
CD19Rop_epHIV7	(2601)	GCGTGAGCCTGCCCGACTACGGCGTGAGCTGGATCCGGCAGCCCCCCAGG
Consensus	(2601)	GA CTG CCG CT C GC CCC CA G 2651 2700
IL13(EQ)41BBZeta	(2369)	GTGTCCGCCGGACAGTT
CD19Rop epHIV7	(2651)	AAGGGCCTGGAATGGCTGGGCGTGATCTGGGGCAGCGAGACCACCTACTA
Consensus	(2651)	G G C GC GAC A T
		2701 2750
IL13 (EQ) 41BBZeta	(2386)	CAGCAGCCTGC-ACGTGCGGGACACCAAGA
CD19Rop epHIV7	(2701)	CAACAGCGCCCTGAAGAGCCGGCTGACCATCATCAAGGACAACAGCAAGA
Consensus	(2701)	CA CAGC C A G GC GG ACA CAAGA
		2751 2800
IL13(EQ)41BBZeta	(2415)	TCGAGGTGGCCCAGTTCGTGAAGGACCTGCTGC
CD19Rop epHIV7	(2751)	GCCAGGTGTTCCTGAAGATGAACAGCCTGCAGACCGACGACACCGCCATC
Consensus	(2751)	C AGGTG CC G TGAA CCTGC G C
		2801 2850
IL13 (EQ) 41BBZeta	(2448)	
CD19Rop_epHIV7	(2801)	TACTACTGCGCCAAGCACTACTACTACGGCGGCAGCTACGCCATGGACTA
Consensus	(2801)	T C CTG AAG A GC G T CG GGA
		2851 2900
IL13 (EQ) 41BBZeta	(2473)	GGGCCGGTTCAAC
CD19Rop_epHIV7	(2851)	CTGGGGCCAGGGCACCAGCGTGACCGTGAGCAGCGAGAGCAAGTACGGCC
Consensus	(2851)	GGGCC G CA C GAGAGCAAGTACGGCC 2901 2950
IL13 (EQ) 41BBZeta	(2502)	
CD19Rop epHIV7	(2901)	CTCCCTGCCCCCTTGCCCTGCCCCGAGTTCCTGGGCGGACCCAGCGTG
Consensus	(2901)	CTCCCTGCCCCCTTGCCCTGCCCC GAGTTC GGGCGGACCCAGCGTG 2951 3000
IL13 (EQ) 41BBZeta	(2552)	
CD19Rop_epHIV7	(2951)	TTCCTGTTCCCCCCAAGCCCAAGGACACCCTGATGATCAGCCGGACCCC
Consensus	(2951)	TTCCTGTTCCCCCCAAGCCCAAGGACACCCTGATGATCAGCCGGACCCC 3001
IL13 (EQ) 41BBZeta	(2602)	
CD19Rop epHIV7	(3001)	CGAGGTGACCTGCGTGGTGGTGGACGTGAGCCAGGAAGATCCCGAGGTCC
Consensus	(3001)	GAGGTGACCTGCGTGGTGGTGGACGTGAGCCAGGAAGATCC GAGGTCC 3051 3100
IL13 (EQ) 41BBZeta	(2652)	
CD19Rop epHIV7	(3051)	AGTTCAATTGGTACGTGGACGCGTGGAGGTGCACAACGCCAAGACCAAG
Consensus	(3051)	AGTTCAATTGGTACGTGGACGCGTGGAGGTGCACAACGCCAAGACCAAG 3101 3150
IL13(EQ)41BBZeta	(2702)	
CD19Rop_epHIV7	(3101)	CCCAGGGAAGAGCAGTTCAACAGCACCTACCGGGTGGTGTCCGTGCTGAC
Consensus	(3101)	CCCAGGGAAGAGCAGTTC A AGCACCTACCGGGTGGTGTCCGTGCTGAC 3151 3200
IL13 (EQ) 41BBZeta	(2752)	
CD19Rop_epHIV7	(3151)	CGTGCTGCACCAGGACTGGCTGAACGGCAAAGAATACAAGTGCAAGGTGT
Consensus	(3151)	CGTGCTGCACCAGGACTGGCTGAACGGCAAAGAATACAAGTGCAAGGTGT 3201 3250

IL13(EO)41BBZeta	(2802)	
CD19Rop epHIV7	(3201)	CCAACAAGGGCCTGCCCAGCAGCATCGAGAAAACCATCAGCAAGGCCAAG
Consensus	(3201)	CCAACAAGGGCCTGCCCAGCAGCATCGAGAAAACCATCAGCAAGGCCAAG
		3251 3300
IL13(EQ)41BBZeta	(2852)	
CD19Rop_epHIV7	(3251)	GGCCAGCCTCGGGAGCCCCAGGTGTACACCCTGCCCCCTTCCCAGGAAGA
Consensus	(3251)	GGCCAGCCTCGGGAGCCCCAGGTGTACACCCTGCCCCCTTCCCAGGAAGA
	/O O O O O O	3301 3350
IL13 (EQ) 41BBZeta	(2902)	
CD19Rop_epHIV7	(3301)	GATGACCAAGAATCAGGTGTCCCTGACCTGCCTGGTGAAGGGCTTCTACC
Consensus	(3301)	GATGACCAAGAATCAGGTGTCCCTGACCTGCCTGGTGAAGGGCTTCTACC 3351 3400
IL13 (EQ) 41BBZeta	(2952)	
CD19Rop_epHIV7	(3351)	CCAGCGACATCGCCGTGGAGTGGGAGAGCAACGGCCAGCCCGAGAACAAC
Consensus	(3351)	CCAGCGACATCGCCGTGGAGTGGGAGAGCAACGGCCAGCCCGAGAACAAC 3401 3450
IL13 (EQ) 41BBZeta	(3002)	TACAAGACCACCCCCCTGTGCTGGACAGCGACGGCAGCTTCTTCCTGTA
CD19Rop_epHIV7	(3401)	TACAAGACCACCCCCTGTGCTGGACAGCGACGGCAGCTTCTTCCTGTA
Consensus	(3401)	TACAAGACCACCCCCTGTGCTGGACAGCGACGGCAGCTTCTTCCTGTA
		3451 3500
IL13 (EQ) 41BBZeta	(3052)	CAGCAGGCTGACCGTGGACAAGAGCCGGTGGCAGGAAGGCAACGTCTTTA
CD19Rop_epHIV7	(3451)	CAGCAGGCTGACCGTGGACAAGAGCCGGTGGCAGGAAGGCAACGTCTTTA
Consensus	(3451)	CAGCAGGCTGACCGTGGACAAGAGCCGGTGGCAGGAAGGCAACGTCTTTA 3501 3550
IL13 (EQ) 41BBZeta	(3102)	GCTGCAGCGTGATGCACGAGGCCCTGCACAACCACTACACCCAGAAGAGC
CD19Rop_epHIV7	(3501)	GCTGCAGCGTGATGCACGAGGCCCTGCACAACCACTACACCCAGAAGAGC
Consensus	(3501)	GCTGCAGCGTGATGCACGAGGCCCTGCACAACCACTACACCCAGAAGAGC
a management and a second		3551 3600
IL13 (EQ) 41BBZeta	(3152)	CTGTCCCTGAGCCTGGGCAAG
CD19Rop_epHIV7	(3551)	CTGTCCCTGAGCCTGGGCAAGATGGCCCTGATCGTGCTGGGCGGCGTGGC
Consensus	(3551)	CTGTCCCTGAGCCTGGGCAAGATGGCCCTGATCGTGCTGGGCGGCGTGGC 3601 3650
IL13 (EQ) 41BBZeta	(3202)	
CD19Rop_epHIV7	(3601)	CGGGCTGCTGTTCATCGGCCTGGGCATCTTTTTC
Consensus	(3601)	CGGGCTGCTGCTGTTCATCGGCCTGGGCATCTTTTTC 3651 3700
IL13(EQ)41BBZeta	(3252)	
CD19Rop epHIV7	(3638)	
Consensus	(3651)	C
		3701 3750
IL13 (EQ) 41BBZeta	(3302)	
CD19Rop_epHIV7	(3639)	
Consensus	(3701)	3751 3800
IL13 (EQ) 41BBZeta	(3352)	CGGGTGAAGTTCAGCCGGTCCGCCGACG
CD19Rop epHIV7	(3639)	CGGGTGAAGTTCAGCCGGTCCGCCGACG
Consensus	(3751)	GGGTGAAGTTCAGCCGGTCCGCCGACG
	χοσχ	3801 3850
IL13 (EQ) 41BBZeta	(3402)	CCCCTGCCTACCAGCAGGGCCAGAACCAGCTGTACAACGAGCTGAACCTG
CD19Rop epHIV7	(3666)	CCCCTGCCTACCAGCAGGGCCAGAACCAGCTGTACAACGAGCTGAACCTG
Consensus	(3801)	CCCCTGCCTACCAGCAGGGCCAGAACCAGCTGTACAACGAGCTGAACCTG
		3851 3900
IL13 (EQ) 41BBZeta	(3452)	GGCAGGCGGAGGATACGACGTGCTGGACAAGCGGAGAGGCCGGGACCC
CD19Rop_epHIV7	(3716)	GGCAGGCGGAGAATACGACGTGCTGGACAAGCGGAGAGGCCGGGACCC
Consensus	(3851)	GGCAGGCGGGAGATACGACGTGCTGGACAAGCGGAGAGGCCGGGACCC

IL13(EQ)41BBZeta	(3502)	3901 3950 TGAGATGGGCGGCAAGCCTCGGCGGAAGACCCCCAGGAAGGCCTGTATA
CD19Rop_epHIV7 Consensus	(3766) (3901)	TGAGATGGGCGGCAAGCCTCGGCGGAAGAACCCCCCAGGAAGGCCTGTATA TGAGATGGGCGGCAAGCCCCAGGCGGAAGAACCCCTCAGGAAGGCCTGTATA TGAGATGGGCGGCAAGCC GGCGGAAGAACCC CAGGAAGGCCTGTATA 3951 4000
IL13(EQ)41BBZeta	(3552)	ACGAACTGCAGAAAGACAAGATGGCCGAGGCCTACAGCGAGATCGGCATG
CD19Rop_epHIV7	(3816)	${\tt ACGAACTGCAGAAAGACAAGATGGCCGAGGCCTACAGCGAGATCGGCATG}$
Consensus	(3951)	ACGAACTGCAGAAAGACAAGATGGCCGAGGCCTACAGCGAGATCGGCATG 4001 4050
IL13 (EQ) 41BBZeta	(3602)	
CD19Rop_epHIV7 Consensus	(3866) (4001)	AAGGGCGAGCGGCGGGGCCAAGGGCCACGACGGCCTGTACCAGGGCCT AAGGGCGAGCGG GG GGGGCAAGGGCCACGACGGCCTGTA CAGGGCCT 4051 4100
IL13(EQ)41BBZeta	(3652)	1,100
CD19Rop_epHIV7	(3916)	GAGCACCGCCACCAAGGATACCTACGACGCCCTGCACATGCAGGCCCTGC
Consensus	(4051)	
	(0700)	4101 4150
IL13 (EQ) 41BBZeta CD19Rop epHIV7	(3702)	CCCCAAGG CCCC
Consensus	(4101)	
Combanada	(1101)	4151 4200
IL13 (EQ) 41BBZeta	(3752)	
CD19Rop_epHIV7	(3970)	
Consensus	(4151)	4201 4250
IL13 (EQ) 41BBZeta	(3802)	
CD19Rop_epHIV7 Consensus	(3970) (4201)	
Consensus	(4201)	4251 4300
IL13(EQ)41BBZeta	(3852)	1500
CD19Rop epHIV7	(3970)	
Consensus	(4251)	4301 4350
IL13(EQ)41BBZeta	(3902)	
CD19Rop_epHIV7	(3970)	
Consensus	(4301)	4351
IL13(EQ)41BBZeta	(3952)	4351 4400
CD19Rop epHIV7	(3970)	
Consensus	(4351)	
		4401 4450
IL13 (EQ) 41BBZeta	(4002)	
CD19Rop_epHIV7	(3970)	
Consensus	(4401)	4451
IL13 (EQ) 41BBZeta	(4052)	4451 4500
CD19Rop epHIV7	(3970)	
Consensus	(4451)	
		4501 4550
IL13(EQ)41BBZeta	(4102)	
CD19Rop_epHIV7	(3970)	
Consensus	(4501)	AEE1
IL13 (EQ) 41BBZeta	(4152)	4551 4600
CD19Rop epHIV7	(3970)	
22101.0P_OP111.	100	

Consensus	(4551)	4604
		4601 4650
IL13(EQ)41BBZeta	(4202)	
CD19Rop_epHIV7	(3970)	
Consensus	(4601)	
		4651 4700
IL13 (EQ) 41BBZeta	(4252)	
CD19Rop_epHIV7	(3970)	
Consensus	(4651)	
		4701 4750
IL13 (EQ) 41BBZeta	(4302)	
CD19Rop epHIV7	(3970)	AGG
Consensus	(4701)	C AGG
	x	4751 4800
IL13 (EQ) 41BBZeta	(4352)	
CD19Rop epHIV7	(3974)	
Consensus	(4751)	#001 #0F0
## 1 0 7#01 4 100##	24.4003	4850
IL13 (EQ) 41BBZeta	(4402)	
CD19Rop_epHIV7	(3975)	
Consensus	(4801)	
		4851 4900
IL13(EQ)41BBZeta	(4452)	
CD19Rop_epHIV7	(3975)	
Consensus	(4851)	
		4901 4950
IL13 (EQ) 41BBZeta	(4502)	
CD19Rop epHIV7	(3975)	
Consensus	(4901)	
.00115011500	(1302)	4951 5000
IL13 (EQ) 41BBZeta	(4552)	133.1
CD19Rop epHIV7	(3975)	
Consensus	(4951)	E001
TT 1 2 / DON 4 1 DDE 3 1 3	446000	5001 5050
IL13 (EQ) 41BBZeta	(4602)	
CD19Rop_epHIV7	(3975)	
Consensus	(5001)	
		5051 5100
IL13(EQ)41BBZeta	(4652)	
CD19Rop_epHIV7	(3975)	
Consensus	(5051)	
		5101 5150
IL13 (EQ) 41BBZeta	(4702)	
CD19Rop epHIV7	(3975)	
Consensus	(5101)	
	V	5151 5200
IL13 (EQ) 41BBZeta	(4752)	TCTAGACCCGGGCTGCAGGAATTCGATATCAAGCTTATCGATAATCAA
CD19Rop epHIV7	(3975)	GACCCGGGCTGCAGGAATTCGATATCAAGCTTATCGATAATCAA
Consensus		GACCCGGGCTGCAGGAATTCGATATCAAGCTTATCGATAATCAA
Compensus	(5151)	5201 5250
TT12/FA\/1007~±-	(4000)	
IL13 (EQ) 41BBZeta	(4802)	CCTCTGGATTACAAAATTTGTGAAAGATTGACTGGTATTCTTAACTATGT
CD19Rop_epHIV7	(4019)	CCTCTGGATTACAAAATTTGTGAAAGATTGACTGGTATTCTTAACTATGT
Consensus	(5201)	CCTCTGGATTACAAAATTTGTGAAAGATTGACTGGTATTCTTAACTATGT
		5251 5300
TI.13 (EO) 41BBZeta	(4852)	TGCTCCTTTTACCCTATCTCGATACCCTGCTTTAATCCCTTTTGTATCATC

CD19Rop_epHIV7 Consensus	(4069) (5251)	TGCTCCTTTTACGCTATGTGGATACGCTGCTTTAATGCCTTTGTATCATG TGCTCCTTTTACGCTATGTGGATACGCTGCTTTAATGCCTTTGTATCATG 5301 5350
IL13 (EQ) 41BBZeta	(4902)	CTATTGCTTCCCGTATGGCTTTCATTTTCTCCTCCTTGTATAAATCCTGG
CD19Rop epHIV7	(4119)	CTATTGCTTCCCGTATGGCTTTCATTTTCTCCTCCTTGTATAAATCCTGG
Consensus	(5301)	CTATTGCTTCCCGTATGGCTTTCATTTTCTCCTCCTTGTATAAATCCTGG 5351 5400
IL13 (EQ) 41BBZeta	(4952)	TTGCTGTCTCTTTATGAGGAGTTGTGGCCCGTTGTCAGGCAACGTGGCGT
CD19Rop_epHIV7	(4169)	TTGCTGTCTCTTTATGAGGAGTTGTGGCCCGTTGTCAGGCAACGTGGCGT
Consensus	(5351)	TTGCTGTCTCTTTATGAGGAGTTGTGGCCCGTTGTCAGGCAACGTGGCGT 5401 5450
IL13(EQ)41BBZeta	(5002)	GGTGTGCACTGTTTTGCTGACGCAACCCCCACTGGTTGGGGCATTGCCA
CD19Rop_epHIV7	(4219)	GGTGTGCACTGTTTTGCTGACGCAACCCCCACTGGTTGGGGCATTGCCA
Consensus	(5401)	GGTGTGCACTGTTTTGCTGACGCAACCCCCACTGGTTGGGGCATTGCCA
		5451 5500
IL13 (EQ) 41BBZeta	(5052)	CCACCTGTCAGCTCCTTTCCGGGACTTTCGCTTTTCCCCCTCCTATTGCC
CD19Rop_epHIV7	(4269)	CCACCTGTCAGCTCCTTTCCGGGACTTTCGCTTTCCCCCTCCTATTGCC
Consensus	(5451)	CCACCTGTCAGCTCCTTTCCGGGACTTTCGCTTTCCCCCTCCTATTGCC 5501 5550
IL13 (EQ) 41BBZeta	(5102)	ACGGCGGAACTCATCGCCGCCTGCCTTGCCCGCTGCTGGACAGGGGCTCG
CD19Rop epHIV7	(4319)	ACGGCGGAACTCATCGCCGCCTGCCTTGCCCGCTGCTGGACAGGGGCTCG
Consensus	(5501)	ACGGCGGAACTCATCGCCGCCTGCCTTGCCCGCTGCTGGACAGGGGCTCG
		5551 5600
IL13(EQ)41BBZeta	(5152)	GCTGTTGGGCACTGACAATTCCGTGGTGTTGTCGGGGAAATCATCGTCCT
CD19Rop_epHIV7	(4369)	GCTGTTGGGCACTGACAATTCCGTGGTGTTGTCGGGGAAATCATCGTCCT
Consensus	(5551)	GCTGTTGGGCACTGACAATTCCGTGGTGTTGTCGGGGAAATCATCGTCCT
TE 1 0 (FO) 41 FF F()	<b>*</b> F000	5650
IL13 (EQ) 41BBZeta	(5202)	TTCCTTGGCTGCTCGCCTGTGTTGCCACCTGGATTCTGCGCGGGACGTCC
CD19Rop_epHIV7	(4419)	TTCCTTGGCTGCTCGCCTGTGTTGCCACCTGGATTCTGCGCGGGACGTCC
Consensus	(5601)	TTCCTTGGCTGCTCGCCTGTGTTGCCACCTGGATTCTGCGCGGGACGTCC 5651 5700
IL13 (EO) 41BBZeta	(5252)	TTCTGCTACGTCCCTTCGGCCCTCAATCCAGCGGACCTTCCTT
CD19Rop epHIV7	(4469)	TTCTGCTACGTCCCTTCGGCCCTCAATCCAGCGGACCTTCCTT
Consensus	(5651)	TTCTGCTACGTCCCTTCGGCCCTCAATCCAGCGGACCTTCCTT
	, v = = = .7	5701 5750
IL13 (EQ) 41BBZeta	(5302)	CCTGCTGCCGGCTCTGCGGCCTCTTCCGCGTCTTCGCCTTCGCCCTCAGA
CD19Rop epHIV7	(4519)	CCTGCTGCCGGCTCTGCGGCCTCTTCCGCGTCTTCGCCCTCAGA
Consensus	(5701)	CCTGCTGCCGGCTCTGCGGCCTCTTCCGCGTCTTCGCCCTCAGA
		5751 5800
IL13 (EQ) 41BBZeta	(5352)	
CD19Rop_epHIV7	(4569)	CGAGTCGGATCTCCCTTTGGGCCGCCTCCCCGCATCGATACCGTCGACTA
Consensus	(5751)	CGAGTCGGATCTCCCTTTGGGCCGCCTCCCCGCATCGATACCGTCGACTA 5801 5850
IL13(EQ)41BBZeta	(5402)	
CD19Rop_epHIV7	(4619)	GCCGTACCTTTAAGACCAATGACTTACAAGGCAGCTGTAGATCTTAGCCA
Consensus	(5801)	GCCGTACCTTTAAGACCAATGACTTACAAGGCAGCTGTAGATCTTAGCCA 5851 5900
IL13 (EQ) 41BBZeta	(5452)	CTTTTTAAAAGAAAAGGGGGGACTGGAAGGGCTAATTCACTCCCAAAGAA
CD19Rop epHIV7	(4669)	CTTTTTAAAAGAAAAGGGGGGACTGGAAGGGCTAATTCACTCCCAAAGAA
Consensus	(5851)	CTTTTTAAAAGAAAAGGGGGGACTGGAAGGGCTAATTCACTCCCAAAGAA
IL13 (EQ) 41BBZeta	(5502)	5901 5950 GACAAGATCTGCTTTTTGCCTGTTACTGGGTCTCTCTGGTTAGACCAGATC
CD19Rop epHIV7	(4719)	GACAAGATCTGCTTTTTGCCTGTACTGGGTCTCTCTGGTTAGACCAGATC
Consensus	(5901)	GACAAGATCTGCTTTTTGCCTGTACTGGGTCTCTCTGGTTAGACCAGATC
201122112000	703000	5951 6000

IL13(EQ)41BBZeta CD19Rop_epHIV7 Consensus	(5552) (4769) (5951)	TGAGCCTGGGAGCTCTCTGGCTAACTAGGGAACCCACTGCTTAAGCCTCA TGAGCCTGGGAGCTCTCTGGCTAACTAGGGAACCCACTGCTTAAGCCTCA TGAGCCTGGGAGCTCTCTGGCTAACTAGGGAACCCACTGCTTAAGCCTCA 6001 6050
IL13(EQ)41BBZeta	(EC00)	ATAAAGCTTGCCTTGAGTGCTTCAAGTAGTGTGTGCCCGTCTGTTGTGTG
1 1211	(5602)	
CD19Rop_epHIV7	(4819)	ATAAAGCTTGCCTTGAGTGCTTCAAGTAGTGTGTGCCCGTCTGTTGTGTG
Consensus	(6001)	ATAAAGCTTGCCTTGAGTGCTTCAAGTAGTGTGTCCCCGTCTGTTGTGT
		6051 6100
IL13 (EQ) 41BBZeta	(5652)	ACTCTGGTAACTAGAGATCCCTCAGACCCTTTTAGTCAGTGTGGAAAATC
CD19Rop_epHIV7	(4869)	ACTCTGGTAACTAGAGATCCCTCAGACCCTTTTAGTCAGTGTGGAAAATC
Consensus	(6051)	ACTCTGGTAACTAGAGATCCCTCAGACCCTTTTAGTCAGTGTGGAAAATC 6101 6150
IL13(EQ)41BBZeta	(5702)	TCTAGCAGAATTCGATATCAAGCTTATCGATACCGTCGACCTCGAGGGGG
CD19Rop epHIV7	(4919)	TCTAGCAGAATTCGATATCAAGCTTATCGATACCGTCGACCTCGAGGGGG
Consensus	(6101)	TCTAGCAGAATTCGATATCAAGCTTATCGATACCGTCGACCTCGAGGGGG
	3 1	6151 6200
IL13 (EQ) 41BBZeta	(5752)	GGCCCGGTACCCAATTCGCCCTATAGTGAGTCGTATTACAATTCACTGGC
CD19Rop epHIV7	(4969)	GGCCCGGTACCCAATTCGCCCTATAGTGAGTCGTATTACAATTCACTGGC
Consensus	(6151)	GGCCCGGTACCCAATTCGCCCTATAGTGAGTCGTATTACAATTCACTGGC
	(0101)	6201 6250
IL13 (EQ) 41BBZeta	(5802)	CGTCGTTTTACAACGTCGTGACTGGGAAAACCCTGGCGTTACCCAACTTA
CD19Rop epHIV7	(5019)	CGTCGTTTTACAACGTCGTGACTGGGAAAACCCTGGCGTTACCCAACTTA
Consensus	(6201)	CGTCGTTTTACAACGTCGTGACTGGGAAAACCCTGGCGTTACCCAACTTA
Combendas	(0201)	6251 6300
IL13 (EQ) 41BBZeta	(5852)	ATCGCCTTGCAGCACATCCCCCTTTCGCCAGCTGGCGTAATAGCGAAGAG
CD19Rop epHIV7	(5069)	ATCGCCTTGCAGCACATCCCCCTTTCGCCAGCTGGCGTAATAGCGAAGAG
Consensus	(6251)	ATCGCCTTGCAGCACATCCCCCTTTCGCCAGCTGGCGTAATAGCGAAGAG
Compensas	(0251)	6301 6350
IL13 (EQ) 41BBZeta	(5902)	GCCCGCACCGATCGCCCTTCCCAACAGTTGCGCAGCCTGAATGGCGAATG
CD19Rop epHIV7	(5119)	GCCCGCACCGATCGCCCTTCCCAACAGTTGCGCAGCCTGAATGGCGAATG
Consensus	(6301)	GCCCGCACCGATCGCCCTTCCCAACAGTTGCGCAGCCTGAATGGCGAATG
		6351 6400
IL13 (EQ) 41BBZeta	(5952)	GAAATTGTAAGCGTTAATATTTTGTTAAAATTCGCGTTAAATTTTTGTTA
CD19Rop_epHIV7	(5169)	GAAATTGTAAGCGTTAATATTTTGTTAAAATTCGCGTTAAATTTTTGTTA
Consensus	(6351)	GAAATTGTAAGCGTTAATATTTTGTTAAAATTCGCGTTAAATTTTTGTTA
		6401 6450
IL13(EQ)41BBZeta	(6002)	AATCAGCTCATTTTTTAACCAATAGGCCGAAATCGGCAAAATCCCTTATA
CD19Rop_epHIV7	(5219)	AATCAGCTCATTTTTTAACCAATAGGCCGAAATCGGCAAAATCCCTTATA
Consensus	(6401)	AATCAGCTCATTTTTTAACCAATAGGCCGAAATCGGCAAAATCCCTTATA
		6451 6500
IL13(EQ)41BBZeta	(6052)	AATCAAAAGAATAGACCGAGATAGGGTTGAGTGTTGTTCCAGTTTGGAAC
CD19Rop_epHIV7	(5269)	AATCAAAAGAATAGACCGAGATAGGGTTGAGTGTTGTTCCAGTTTGGAAC
Consensus	(6451)	AATCAAAAGAATAGACCGAGATAGGGTTGAGTGTTGCAGTTTGGAAC 6501 6550
IL13(EQ)41BBZeta	(6102)	AAGAGTCCACTATTAAAGAACGTGGACTCCAACGTCAAAGGGCGAAAAAC
CD19Rop epHIV7		AAGAGTCCACTATTAAAGAACGTGGACTCCAACGTCAAAGGGCGAAAAAC
CD19ROP_eph1V/ Consensus		
consensus	(COUL)	AAGAGTCCACTATTAAAGAACGTGGACTCCAACGTCAAAGGGCGAAAAAC 6551 6600
TT 1.2 / DOX 410007 a + a	161 EON	
IL13 (EQ) 41BBZeta	(6152) (5360)	CGTCTATCAGGGCGATGGCCCACTACGTGAACCATCACCCTAATCAAGTT
CD19Rop_epHIV7	(5369)	CGTCTATCAGGGCGATGGCCCACTACGTGAACCATCACCCTAATCAAGTT
Consensus	(6551)	CGTCTATCAGGGCGATGGCCCACTACGTGAACCATCACCCTAATCAAGTT 6601 6650
IL13(EQ)41BBZeta	(6202)	TTTTGGGGTCGAGGTGCCGTAAAGCACTAAATCGGAACCCTAAAGGGAGC
CD19Rop epHIV7	(5419)	TTTTGGGGTCGAGGTGCCGTAAAGCACTAAATCGGAACCCTAAAGGGAGC TTTTGGGGTCGAGGTGCCGTAAAGCACTAAATCGGAACCCTAAAGGGAGC
CD19KOP_eph1v/ Consensus	(6601)	TTTTGGGGTCGAGGTGCCGTAAAGCACTAAATCGGAACCCTAAAGGGAGC
Consensus	(OONT)	JOADODAAA I JOADO LAAA I DADAAA I BOOD I DDAD LI I I I I

		6651 6700
IL13(EO)41BBZeta	(6252)	CCCCGATTTAGAGCTTGACGGGGAAAGCCGGCGAACGTGGCGAGAAAGGA
CD19Rop epHIV7	(5469)	CCCCGATTTAGAGCTTGACGGGGAAAGCCGGCGAACGTGGCGAGAAAGGA
Consensus	(6651)	CCCCGATTTAGAGCTTGACGGGGAAAGCCGGCGAACGTGGCGAGAAAGGA
		6701 6750
IL13 (EQ) 41BBZeta	(6302)	AGGGAAGAAGCGAAAGGAGCGGGCGCTAGGGCGCTGGCAAGTGTAGCGG
CD19Rop_epHIV7	(5519)	AGGGAAGAAAGCGAAAGGAGCGGGCGCTAGGGCGCTGGCAAGTGTAGCGG
Consensus	(6701)	AGGGAAGAAAGCGAAAGGAGCGGGCGCTAGGGCGCTGGCAAGTGTAGCGG 6751 6800
IL13 (EO) 41BBZeta	(6352)	TCACGCTGCGCGTAACCACACACCCGCCGCGCTTAATGCGCCGCTACAG
CD19Rop epHIV7	(5569)	TCACGCTGCGCGTAACCACACACCCGCCGCGTTAATGCGCCGCTACAG
Consensus	(6751)	TCACGCTGCGCGTAACCACCACACCCGCCGCGCTTAATGCGCCGCTACAG
		6801 6850
IL13 (EQ) 41BBZeta	(6402)	GGCGCGTCAGGTGGCACTTTTCGGGGAAATGTGCGCGGAACCCCTATTTG
CD19Rop_epHIV7	(5619)	GGCGCGTCAGGTGGCACTTTTCGGGGAAATGTGCGCGGAACCCCTATTTG
Consensus	(6801)	GGCGCGTCAGGTGGCACTTTTCGGGGAAATGTGCGCGGAACCCCTATTTG 6851 6900
IL13 (EQ) 41BBZeta	(6452)	TTTATTTTTCTAAATACATTCAAATATGTATCCGCTCATGAGACAATAAC
CD19Rop epHIV7	(5669)	TTTATTTTTCTAAATACATTCAAATATGTATCCGCTCATGAGACAATAAC
Consensus	(6851)	TTTATTTTTCTAAATACATTCAAATATGTATCCGCTCATGAGACAATAAC
		6901 6950
IL13 (EQ) 41BBZeta	(6502)	CCTGATAAATGCTTCAATAATATTGAAAAAGGAAGAGTATGAGTATTCAA
CD19Rop_epHIV7	(5719)	CCTGATAAATGCTTCAATAATATTGAAAAAGGAAGAGTATGAGTATTCAA
Consensus	(6901)	CCTGATAAATGCTTCAATAATATTGAAAAAGGAAGAGTATGAGTATTCAA 6951 7000
IL13(EQ)41BBZeta	(6552)	CATTTCCGTGTCGCCCTTATTCCCTTTTTTGCGGCATTTTGCCTTCCTGT
CD19Rop epHIV7	(5769)	CATTTCCGTGTCGCCCTTATTCCCTTTTTTGCGCATTTTGCCTTCCTGT
Consensus	(6951)	CATTTCCGTGTCGCCCTTATTCCCTTTTTTGCGGCATTTTGCCTTCCTGT
		7001 7050
IL13(EQ)41BBZeta	(6602)	TTTTGCTCACCCAGAAACGCTGGTGAAAGTAAAAGATGCTGAAGATCAGT
CD19Rop_epHIV7	(5819)	TTTTGCTCACCCAGAAACGCTGGTGAAAGTAAAAGATGCTGAAGATCAGT
Consensus	(7001)	TTTTGCTCACCCAGAAACGCTGGTGAAAGTAAAAGATGCTGAAGATCAGT 7051 7100
IL13(EQ)41BBZeta	(6652)	TGGGTGCACGAGTGGGTTACATCGAACTGGATCTCAACAGCGGTAAGATC
CD19Rop epHIV7	(5869)	TGGGTGCACGAGTGGGTTACATCGAACTGGATCTCAACAGCGGTAAGATC
Consensus	(7051)	TGGGTGCACGAGTGGGTTACATCGAACTGGATCTCAACAGCGGTAAGATC
		7101 7150
IL13(EQ)41BBZeta	(6702)	CTTGAGAGTTTTCGCCCCGAAGAACGTTTTCCAATGATGAGCACTTTTAA
CD19Rop_epHIV7	(5919)	CTTGAGAGTTTTCGCCCCGAAGAACGTTTTCCAATGATGAGCACTTTTAA
Consensus	(7101)	CTTGAGAGTTTTCGCCCCGAAGAACGTTTTCCAATGATGAGCACTTTTAA 7151 7200
IL13 (EQ) 41BBZeta	(6752)	AGTTCTGCTATGTGGCGCGGTATTATCCCGTATTGACGCCGGGCAAGAGC
CD19Rop epHIV7	<b>(</b> 5969)	AGTTCTGCTATGTGGCGCGGTATTATCCCGTATTGACGCCGGGCAAGAGC
Consensus	(7151)	AGTTCTGCTATGTGGCGCGGTATTATCCCGTATTGACGCCGGGCAAGAGC
		7201 7250
IL13 (EQ) 41BBZeta	(6802)	AACTCGGTCGCCGCATACACTATTCTCAGAATGACTTGGTTGAGTACTCA
CD19Rop_epHIV7	(6019)	AACTCGGTCGCCGCATACACTATTCTCAGAATGACTTGGTTGAGTACTCA
Consensus	(7201)	AACTCGGTCGCCGCATACACTATTCTCAGAATGACTTGGTTGAGTACTCA 7251 7300
IL13 (EQ) 41BBZeta	(6852)	CCAGTCACAGAAAAGCATCTTACGGATGGCATGACAGTAAGAGAATTATG
CD19Rop_epHIV7	(6069)	CCAGTCACAGAAAAGCATCTTACGGATGGCATGACAGTAAGAGAATTATG
Consensus	(7251)	CCAGTCACAGAAAAGCATCTTACGGATGGCATGACAGTAAGAGAATTATG
IL13 (EQ) 41BBZeta	(6902)	7350 CAGTGCTGCCATAACCATGAGTGATAACACTGCGGCCAACTTACTT
CD19Rop epHIV7	(6119)	CAGTGCTGCCATAACCATGAGTGATAACACTGCGGCCAACTTACTT
~	7	

	/E.O.O.4.\	
Consensus	(7301)	CAGTGCTGCCATAACCATGAGTGATAACACTGCGGCCAACTTACTT
IL13 (EQ) 41BBZeta CD19Rop epHIV7	(6952) (6169)	CAACGATCGGAGGACCGAAGGAGCTAACCGCTTTTTTGCACAACATGGGG CAACGATCGGAGGACCGAAGGAGCTAACCGCTTTTTTGCACAACATGGGG
Consensus	(7351)	CAACGATCGGAGGACCGAAGGAGCTAACCGCTTTTTTGCACAACATGGGG
TI 1 2 / EOA #1 BB7 8 + 8	(7002)	7450
IL13 (EQ) 41BBZeta	(7002)	GATCATGTAACTCGCCTTGATCGTTGGGAACCGGAGCTGAATGAA
CD19Rop_epHIV7	(6219)	GATCATGTAACTCGCCTTGATCGTTGGGAACCGGAGCTGAATGAA
Consensus	(7401)	GATCATGTAACTCGCCTTGATCGTTGGGAACCGGAGCTGAATGAA
IL13 (EQ) 41BBZeta	(7052)	7451 7500 ACCAAACGACGAGGGTGACACCACGATGCCTGTAGCAATGGCAACAACGT
	(6269)	ACCAAACGACGAGGGTGACACCACGATGCCTGTAGCAATGGCAACAACGT
CD19Rop_epHIV7 Consensus	(7451)	ACCAAACGACGAGCGTGACACCACGATGCCTGTAGCAATGGCAACAACGT
Consensus	(743I)	7501 7550
IL13 (EQ) 41BBZeta	(7102)	TGCGCAAACTATTAACTGGCGAACTACTTACTCTAGCTTCCCGGCAACAA
CD19Rop epHIV7	(6319)	TGCGCÄAACTATTAACTGGCGAACTACTTACTCTAGCTTCCCGGCAACAA
Consensus	(7501)	TGCGCAAACTATTAACTGGCGAACTACTTACTCTAGCTTCCCGGCAACAA
Consensus	(1001)	7551 7600
IL13 (EQ) 41BBZeta	(7152)	TTAATAGACTGGATGGAGGCGGATAAAGTTGCAGGACCACTTCTGCGCTC
CD19Rop epHIV7	(6369)	TTAATAGACTGGATGGAGGCGGATAAAGTTGCAGGACCACTTCTGCGCTC
Consensus	(7551)	TTAATAGACTGGATGGAGGCGGATAAAGTTGCAGGACCACTTCTGCGCTC
ल का जाताचार स्थापन	V, : , F - F - Z	7601 7650
IL13(EQ)41BBZeta	(7202)	GGCCCTTCCGGCTGGCTGGTTTATTGCTGATAAATCTGGAGCCGGTGAGC
CD19Rop epHIV7	(6419)	GGCCCTTCCGGCTGGCTGGTTTATTGCTGATAAATCTGGAGCCGGTGAGC
Consensus	(7601)	GGCCCTTCCGGCTGGCTGGTTTATTGCTGATAAATCTGGAGCCGGTGAGC
		7651 7700
IL13(EQ)41BBZeta	(7252)	GTGGGTCTCGCGGTATCATTGCAGCACTGGGGCCAGATGGTAAGCCCTCC
CD19Rop_epHIV7	(6469)	GTGGGTCTCGCGGTATCATTGCAGCACTGGGGCCAGATGGTAAGCCCTCC
Consensus	(7651)	GTGGGTCTCGCGGTATCATTGCAGCACTGGGGCCAGATGGTAAGCCCTCC
		7701 7750
IL13 (EQ) 41BBZeta	(7302)	CGTATCGTAGTTATCTACACGACGGGGAGTCAGGCAACTATGGATGAACG
CD19Rop_epHIV7	(6519)	CGTATCGTAGTTATCTACACGACGGGGAGTCAGGCAACTATGGATGAACG
Consensus	(7701)	CGTATCGTAGTTATCTACACGACGGGGAGTCAGGCAACTATGGATGAACG
		7751 7800
IL13 (EQ) 41BBZeta	(7352)	AAATAGACAGATCGCTGAGATAGGTGCCTCACTGATTAAGCATTGGTAAC
CD19Rop_epHIV7	(6569)	AAATAGACAGATCGCTGAGATAGGTGCCTCACTGATTAAGCATTGGTAAC
Consensus	(7751)	AAATAGACAGATCGCTGAGATAGGTGCCTCACTGATTAAGCATTGGTAAC
		7801 7850
IL13 (EQ) 41BBZeta	(7402)	TGTCAGACCAAGTTTACTCATATATACTTTAGATTGATTTAAAACTTCAT
CD19Rop_epHIV7	(6619)	TGTCAGACCAAGTTTACTCATATATACTTTAGATTGATTTAAAACTTCAT
Consensus	(7801)	TGTCAGACCAAGTTTACTCATATATACTTTAGATTGATTTAAAACTTCAT 7851 7900
TT.12 (EO) (11 BB7 at a	(7452)	
IL13 (EQ) 41BBZeta	(6669)	TTTTAATTTAAAAGGATCTAGGTGAAGATCCTTTTTGATAATCTCATGAC TTTTAATTTAA
CD19Rop_epHIV7 Consensus		TTTTAATTTAAAAGGATCTAGGTGAAGATCCTTTTTGATAATCTCATGAC
Consensus	(7851)	7901 7950
IL13 (EQ) 41BBZeta	(7502)	CAAAATCCCTTAACGTGAGTTTTCGTTCCACTGAGCGTCAGACCCCGTAG
CD19Rop epHIV7	(6719)	CAAAATCCCTTAACGTGAGTTTTCGTTCCACTGAGCGTCAGACCCCGTAG
Consensus	(7901)	
	•	7951 8000
IL13(EQ)41BBZeta	(7552)	AAAAGATCAAAGGATCTTCTTGAGATCCTTTTTTTCTGCGCGTAATCTGC
CD19Rop_epHIV7	(6769)	AAAAGATCAAAGGATCTTCTTGAGATCCTTTTTTTCTGCGCGTAATCTGC
Consensus	(7951)	AAAAGATCAAAGGATCTTCTTGAGATCCTTTTTTTCTGCGCGTAATCTGC
		8001 8050
IL13(EQ)41BBZeta	(7602)	TGCTTGCAAACAAAAAACCACCGCTACCAGCGGTGGTTTGTTT

CD19Rop_epHIV7 Consensus	(6819) (8001)	TGCTTGCAAACAAAAAACCACCGCTACCAGCGGTGGTTTGTTT
IL13 (EQ) 41BBZeta	(7652)	8051 8100 TCAAGAGCTACCAACTCTTTTTCCGAAGGTAACTGGCTTCAGCAGAGCGC
CD19Rop_epHIV7	(6869)	TCAAGAGCTACCAACTCTTTTTCCGAAGGTAACTGGCTTCAGCAGAGCGC
Consensus	(8051)	TCAAGAGCTACCAACTCTTTTTCCGAAGGTAACTGGCTTCAGCAGAGCGC 8101 8150
IL13 (EQ) 41BBZeta	(7702)	AGATACCAAATACTGTTCTTCTAGTGTAGCCGTAGTTAGGCCACCACTTC
CD19Rop_epHIV7	(6919)	AGATACCAAATACTGTTCTTCTAGTGTAGCCGTAGTTAGGCCACCACTTC
Consensus	(8101)	AGATACCAAATACTGTTCTTCTAGTGTAGCCGTAGTTAGGCCACCACTTC 8151 8200
IL13(EQ)41BBZeta	(7752)	AAGAACTCTGTAGCACCGCCTACATACCTCGCTCTGCTAATCCTGTTACC
CD19Rop_epHIV7	(6969)	AAGAACTCTGTAGCACCGCCTACATACCTCGCTCTGCTAATCCTGTTACC
Consensus	(8151)	AAGAACTCTGTAGCACCGCCTACATACCTCGCTCTGCTAATCCTGTTACC 8201 8250
IL13(EQ)41BBZeta	(7802)	AGTGGCTGCCAGTGGCGATAAGTCGTGTCTTACCGGGTTGGACTCAA
CD19Rop_epHIV7	(7019)	AGTGGCTGCCAGTGGCGATAAGTCGTGTCTTACCGGGTTGGACTCAA
Consensus	(8201)	AGTGGCTGCCAGTGGCGATAAGTCGTGTCTTACCGGGTTGGACTCAA 8251 8300
IL13 (EQ) 41BBZeta	(7852)	GACGATAGTTACCGGATAAGGCGCAGCGGTCGGGCTGAACGGGGGTTCG
CD19Rop_epHIV7	(7069)	GACGATAGTTACCGGATAAGGCGCAGCGGTCGGGCTGAACGGGGGGTTCG
Consensus	(8251)	GACGATAGTTACCGGATAAGGCGCAGCGGTCGGGCTGAACGGGGGGTTCG 8301 8350
IL13 (EQ) 41BBZeta	(7902)	TGCACACAGCCCAGCTTGGAGCGAACGACCTACACCGAACTGAGATACCT
CD19Rop_epHIV7	(7119)	TGCACACAGCCCAGCTTGGAGCGAACGACCTACACCGAACTGAGATACCT
Consensus	(8301)	TGCACACAGCCCAGCTTGGAGCGAACGACCTACACCGAACTGAGATACCT 8351 8400
IL13 (EQ) 41BBZeta	(7952)	ACAGCGTGAGCTATGAGAAAGCGCCACGCTTCCCGAAGGGAGAAAGGCGG
CD19Rop epHIV7	(7169)	ACAGCGTGAGCTATGAGAAAGCGCCACGCTTCCCGAAGGGAGAAAGGCGG
Consensus	(8351)	ACAGCGTGAGCTATGAGAAAGCGCCACGCTTCCCGAAGGGAGAAAGGCGG 8401 8450
IL13 (EQ) 41BBZeta	(8002)	ACAGGTATCCGGTAAGCGGCAGGGTCGGAACAGGAGAGCGCACGAGGGAG
CD19Rop epHIV7	(7219)	ACAGGTATCCGGTAAGCGGCAGGGTCGGAACAGGAGAGCGCACGAGGGAG
Consensus	(8401)	ACAGGTATCCGGTAAGCGGCAGGGTCGGAACAGGAGAGCGCACGAGGGAG 8451 8500
IL13 (EQ) 41BBZeta	(8052)	CTTCCAGGGGAAACGCCTGGTATCTTTATAGTCCTGTCGGGTTTCGCCA
CD19Rop epHIV7	(7269)	CTTCCAGGGGGAAACGCCTGGTATCTTTATAGTCCTGTCGGGTTTCGCCA
Consensus	(8451)	CTTCCAGGGGGAAACGCCTGGTATCTTTATAGTCCTGTCGGGTTTCGCCA 8501 8550
IL13 (EQ) 41BBZeta	(8102)	CCTCTGACTTGAGCGTCGATTTTTGTGATGCTCGTCAGGGGGGGG
CD19Rop epHIV7	(7319)	CCTCTGACTTGAGCGTCGATTTTTGTGATGCTCGTCAGGGGGGGG
Consensus	(8501)	CCTCTGACTTGAGCGTCGATTTTTGTGATGCTCGTCAGGGGGGGG
IL13(EQ)41BBZeta	(8152)	TATGGAAAAACGCCAGCAACGCGGCCTTTTTACGGTTCCTGGCCTTTTGC
CD19Rop epHIV7	(7369)	TATGGAAAAACGCCAGCAACGCGGCCTTTTTACGGTTCCTGGCCTTTTGC
Consensus	(8551)	TATGGAAAAACGCCAGCAACGCGGCCTTTTTACGGTTCCTGGCCTTTTGC 8601
IL13 (EQ) 41BBZeta	(8202)	TGGCCTTTTGCTCACATGTTCTTTCCTGCGTTATCCCCTGATTCTGTGGA
CD19Rop_epHIV7	(7419)	TGGCCTTTTGCTCACATGTTCTTTCCTGCGTTATCCCCTGATTCTGTGGA
Consensus	(8601)	TGGCCTTTTGCTCACATGTTCTTTCCTGCGTTATCCCCTGATTCTGTGGA 8651 8700
IL13(EQ)41BBZeta	(8252)	TAACCGTATTACCGCCTTTGAGTGAGCTGATACCGCTCGCCGCAGCCGAA
CD19Rop_epHIV7	(7469)	TAACCGTATTACCGCCTTTGAGTGAGCTGATACCGCTCGCCGCAGCCGAA
Consensus	(8651)	TAACCGTATTACCGCCTTTGAGTGAGCTGATACCGCTCGCCGCAGCCGAA 8701 8750

IL13 (EQ) 41BBZeta CD19Rop_epHIV7 Consensus	(8302) (7519) (8701)	CGACCGAGCGCAGCGAGTCAGTGAGCGAGGAAGCGGCAAATA CGACCGAGCGCGAGTCAGTGAGCGAGGAAGCGGAAGAGCGCCCAATA CGACCGAGCGCAGCGAGTCAGTGAGCGAGGAAGCGGAAGAGCGCCCAATA
00,,00,,000	(10) / 0 4 //	8751 8800
IL13(EQ)41BBZeta	(8352)	CGCAAACCGCCTCTCCCCGCGCGTTGGCCGATTCATTAATGCAGCTGGCA
CD19Rop_epHIV7	(7569)	CGCAAACCGCCTCTCCCCGCGCGTTGGCCGATTCATTAATGCAGCTGGCA
Consensus	(8751)	CGCAAACCGCCTCTCCCCGCGCGTTGGCCGATTCATTAATGCAGCTGGCA
IL13(EQ)41BBZeta	(8402)	8801 8850 CGACAGGTTTCCCGACTGGAAAGCGGGCAGTGAGCGCAACGCAATTAATG
CD19Rop epHIV7	(7619)	CGACAGGTTTCCCGACTGGAAAGCGGGCAGTGAGCGCAACGCAATTAATG
CD19ROP_epii1v7	(8801)	CGACAGGTTTCCCGACTGGAAAGCGGGCAGTGAGCGCAACGCAATTAATG
Compeniodo	(0001)	8851 8900
IL13 (EQ) 41BBZeta	(8452)	TGAGTTAGCTCACTCATTAGGCACCCCAGGCTTTACACTTTATGCTTCCG
CD19Rop_epHIV7	(7669)	TGAGTTAGCTCACTCATTAGGCACCCCAGGCTTTACACTTTATGCTTCCG
Consensus	(8851)	TGAGTTAGCTCACTCATTAGGCACCCCAGGCTTTACACTTTATGCTTCCG
TT 1 3 / EQ \ / 1 DD E - 4 -	#0:E0:04	8901 8950
IL13 (EQ) 41BBZeta	(8502) (7719)	GCTCGTATGTTGTGTGGAATTGTGAGCGGATAACAATTTCACACAGGAAA GCTCGTATGTTGTGTGGAATTGTGAGCGGATAACAATTTCACACAGGAAA
CD19Rop_epHIV7 Consensus	(8901)	GCTCGTATGTTGTGTGGAATTGTGAGCGGATAACAATTTCACACAGGAAA
Consensus	(0301)	8951 9000
IL13 (EQ) 41BBZeta	(8552)	CAGCTATGACCATGATTACGCCAAGCTCGAAATTAACCCTCACTAAAGGG
CD19Rop epHIV7	(7769)	CAGCTATGACCATGATTACGCCAAGCTCGAAATTAACCCTCACTAAAGGG
Consensus	(8951)	CAGCTATGACCATGATTACGCCAAGCTCGAAATTAACCCTCACTAAAGGG
	A	9001 9050
IL13 (EQ) 41BBZeta	(8602)	AACAAAAGCTGGAGCTCCACCGCGGTGGCGGCCTCGAGGTCGAGATCCGG
CD19Rop_epHIV7	(7819)	AACAAAAGCTGGAGCTCCACCGCGGTGGCGGCCTCGAGGTCGAGATCCGG
Consensus	(9001)	AACAAAAGCTGGAGCTCCACCGCGGTGGCGGCCTCGAGGTCGAGATCCGG 9051 9100
IL13 (EQ) 41BBZeta	(8652)	TCGACCAGCAACCATAGTCCCGCCCCTAACTCCGCCCATCCCGCCCCTAA
CD19Rop epHIV7	(7869)	TCGACCAGCAACCATAGTCCCGCCCCTAACTCCGCCCATCCCGCCCCTAA
Consensus	(9051)	TCGACCAGCAACCATAGTCCCGCCCCTAACTCCGCCCCATCCCGCCCCTAA
TE 1 3 (PA) AT PRESENT	70700	9101 9150
IL13(EQ)41BBZeta CD19Rop epHIV7	(8702) (7919)	CTCCGCCCAGTTCCGCCCATTCTCCGCCCCATGGCTGACTAATTTTTTT CTCCGCCCAGTTCCGCCCATTCTCCGCCCCATGGCTGACTAATTTTTTTT
CD19KOP_epH1V/ Consensus	(9101)	CTCCGCCCAGTTCCGCCCATTCTCCGCCCCATGGCTGACTAATTTTTTTT
Compensas	(3101)	9151 9200
IL13 (EQ) 41BBZeta	(8752)	ATTTATGCAGAGGCCGAGGCCGCCTCGGCCTCTGAGCTATTCCAGAAGTA
CD19Rop epHIV7	(7969)	ATTTATGCAGAGGCCGAGGCCGCCTCGGCCTCTGAGCTATTCCAGAAGTA
Consensus	(9151)	ATTTATGCAGAGGCCGAGGCCGCCTCGGCCTCTGAGCTATTCCAGAAGTA
		9201 9250
IL13 (EQ) 41BBZeta	(8802)	GTGAGGAGGCTTTTTTGGAGGCCTAGGCTTTTGCAAAAAGCTTCGACGGT
CD19Rop_epHIV7	(8019)	GTGAGGAGGCTTTTTTGGAGGCCTAGGCTTTTGCAAAAAGCTTCGACGGT
Consensus	(9201)	GTGAGGAGGCTTTTTTGGAGGCCTAGGCTTTTGCAAAAAGCTTCGACGGT 9251 9300
IL13 (EQ) 41BBZeta	(8852)	ATCGATTGGCTCATGTCCAACATTACCGCCATGTTGACATTGATTATTGA
CD19Rop_epHIV7	(8069)	ATCGATTGGCTCATGTCCAACATTACCGCCATGTTGACATTGATTATTGA
Consensus	(9251)	ATCGATTGGCTCATGTCCAACATTACCGCCATGTTGACATTGATTATTGA
		9301 9350
IL13 (EQ) 41BBZeta	(8902)	CTAGTTATTAATAGTAATCAATTACGGGGTCATTAGTTCATAGCCCATAT
CD19Rop_epHIV7	(8119)	CTAGTTATTAATAGTAATCAATTACGGGGTCATTAGTTCATAGCCCATAT
Consensus	(9301)	CTAGTTATTAATAGTAATCAATTACGGGGTCATTAGTTCATAGCCCATAT 9351 9400
IL13(EQ)41BBZeta	(8952)	ATGGAGTTCCGCGTTACATAACTTACGGTAAATGGCCCGCCTGGCTGACC
CD19Rop epHIV7	(8169)	ATGGAGTTCCGCGTTACATAACTTACGGTAAATGGCCCGCCTGGCTGACC
Consensus	(9351)	ATGGAGTTCCGCGTTACATAACTTACGGTAAATGGCCCGCCTGGCTGACC

		9401 9450
IL13(EO)41BBZeta	(9002)	GCCCAACGACCCCCGCCCATTGACGTCAATAATGACGTATGTTCCCATAG
CD19Rop epHIV7	(8219)	GCCCAACGACCCCGCCCATTGACGTCAATAATGACGTATGTTCCCATAG
Consensus	(9401)	GCCCAACGACCCCCGCCCATTGACGTCAATAATGACGTATGTTCCCATAG
	36 3	9451 9500
IL13(EQ)41BBZeta	(9052)	TAACGCCAATAGGGACTTTCCATTGACGTCAATGGGTGGAGTATTTACGG
CD19Rop epHIV7	(8269)	TAACGCCAATAGGGACTTTCCATTGACGTCAATGGGTGGAGTATTTACGG
Consensus	(9451)	TAACGCCAATAGGGACTTTCCATTGACGTCAATGGGTGGAGTATTTACGG
		9501 9550
IL13(EQ)41BBZeta	(9102)	TAAACTGCCCACTTGGCAGTACATCAAGTGTATCATATGCCAAGTACGCC
CD19Rop epHIV7	(8319)	TAAACTGCCCACTTGGCAGTACATCAAGTGTATCATATGCCAAGTACGCC
Consensus	(9501)	TAAACTGCCCACTTGGCAGTACATCAAGTGTATCATATGCCAAGTACGCC
		9551 9600
IL13(EQ)41BBZeta	(9152)	CCCTATTGACGTCAATGACGGTAAATGGCCCGCCTGGCATTATGCCCAGT
CD19Rop_epHIV7	(8369)	CCCTATTGACGTCAATGACGGTAAATGGCCCGCCTGGCATTATGCCCAGT
Consensus	(9551)	CCCTATTGACGTCAATGACGGTAAATGGCCCGCCTGGCATTATGCCCAGT
		9601 9650
IL13(EQ)41BBZeta	(9202)	ACATGACCTTATGGGACTTTCCTACTTGGCAGTACATCTACGTATTAGTC
CD19Rop_epHIV7	(8419)	ACATGACCTTATGGGACTTTCCTACTTGGCAGTACATCTACGTATTAGTC
Consensus	(9601)	ACATGACCTTATGGGACTTTCCTACTTGGCAGTACATCTACGTATTAGTC
		9651 9700
IL13(EQ)41BBZeta	(9252)	ATCGCTATTACCATGGTGATGCGGTTTTGGCAGTACATCAATGGGCGTGG
CD19Rop_epHIV7	(8469)	ATCGCTATTACCATGGTGATGCGGTTTTTGGCAGTACATCAATGGGCGTGG
Consensus	(9651)	ATCGCTATTACCATGGTGATGCGGTTTTTGGCAGTACATCAATGGGCGTGG
		9701 9750
IL13(EQ)41BBZeta	(9302)	ATAGCGGTTTGACTCACGGGGATTTCCAAGTCTCCACCCCATTGACGTCA
CD19Rop_epHIV7	(8519)	ATAGCGGTTTGACTCACGGGGATTTCCAAGTCTCCACCCCATTGACGTCA
Consensus	(9701)	ATAGCGGTTTGACTCACGGGGATTTCCAAGTCTCCACCCCATTGACGTCA
		9751 9800
IL13(EQ)41BBZeta	(9352)	ATGGGAGTTTGTTTTGGCACCAAAATCAACGGGACTTTCCAAAATGTCGT
CD19Rop_epHIV7	(8569)	ATGGGAGTTTGTTTTGGCACCAAAATCAACGGGACTTTCCAAAATGTCGT
Consensus	(9751)	ATGGGAGTTTGTTTTGGCACCAAAATCAACGGGACTTTCCAAAATGTCGT
	70.4003	9801 9850
IL13 (EQ) 41BBZeta	(9402)	AACAACTCCGCCCCATTGACGCAAATGGGCGGTAGGCGTGTACGGAATTC
CD19Rop_epHIV7	(8619)	AACAACTCCGCCCCATTGACGCAAATGGGCGGTAGGCGTGTACGGAATTC
Consensus	(9801)	AACAACTCCGCCCCATTGACGCAAATGGGCGGTAGGCGTGTACGGAATTC 9851 9900
IL13(EQ)41BBZeta	(9452)	GGAGTGGCGAGCCCTCAGATCCTGCATATAAGCAGCTGCTTTTTGCCTGT
CD19Rop epHIV7	(8669)	GGAGTGGCGAGCCCTCAGATCCTGCATATAAGCAGCTGCTTTTTGCCTGT
CD19ROP_epH1V7 Consensus	(9851)	GGAGTGGCGAGCCCTCAGATCCTGCATATAAGCAGCTGCTTTTTGCCTGT
Consensus	(2021)	9901 9914
IL13(EO)41BBZeta	(9502)	ACTGGGTCTCTCTG
CD19Rop epHIV7	(8719)	ACTGGGTCTCTCTG
Consensus	(9901)	ACTGGGTCTCTCTG

IL13(EmY)-CD8h3-CD8tm2-41BB-Zeta

MLLLVTSLLLCELPHPAFLLIPGPVPPSTALR LIEELVNITQNQKAPLCNGSMVWSINLTAGM

GMCSFRa signal peptide IL13(EmY)

YCAALESLINVSGCSAIEKTQRMLSGFCPHKVSAGQFSSLHVRDTKIEVAQFVKDLLLHLKKLF

REGRENAKPTTTPAPRPPTPAPTIASQPLSLRPEACRPAAGGAVHTRGLDFACDIYIWAPLAG

CD8hinge (48 aa) CD8tm(2)

TCGVLLLSLVITLYKRGRKKLLYIFKQPFMRPVQTTQEEDGCSCRFPEEEEGGCELGGGRVKFS

4-1BB cyto CD3ζ

RSADAPAYQQGQNQLYNELNLGRREEYDVLDKRRGRDPEMGGKPRRKNPQEGLYNELQK
DKMAEAYSEIGMKGERRRGKGHDGLYQGLSTATKDTYDALHMQALPPR

GMCSFRa signal peptide IL13(EmY) CD8hinge CD8 transmembrane (2) 4-1BB cyto (Gly)3 Zeta

IL13(EmY)-CD8h3-CD28tm-CD28gg-41BB-Zeta

MLLLVTSLLLCELPHPAFLLIPGPVPPSTALR LIEELVNITQNQKAPLCNGSMVWSINLTAGM

GMCSFRa signal peptide IL13(EmY)

YCAALESLINVSGCSAIEKTQRMLSGFCPHKVSAGQFSSLHVRDTKIEVAQFVKDLLLHLKKLF

REGRFNAKPTTTPAPRPPTPAPTIASQPLSLRPEACRPAAGGAVHTRGLDFACDFWVLVVVG

CD8 hinge (48 aa) CD28tm

GVLACYSLLVTVAFIIFWV<u>RSKRSRGGHSDYMNMTPRRPGPTRKHYQPYAPPRDFAAYRS</u>G
CD28gg

GG<u>KRGRKKLLYIFKQPFMRPVQTTQEEDGCSCRFPEEEEGGCEL</u>GGG<u>RVKFSRSADAPAYQ</u>
4-1BB cyto CD3ζ

QGQNQLYNELNLGRREEYDVLDKRRGRDPEMGGKPRRKNPQEGLYNELQKDKMAEAYSEI
GMKGERRRGKGHDGLYQGLSTATKDTYDALHMQALPPR

GMCSFRa signal peptide IL13(EmY) CD8hinge CD28 transmembrane CD28gg 4-1BB cyto (Gly)3 Zeta

IL13(EmY)-IgG4(HL-CH3)-CD4tm-41BB-Zeta

MLLLVTSLLLCELPHPAFLLIPGPVPPSTALR LIEELVNITQNQKAPLCNGSMVWSINLTAGM GMCSFRa signal peptide IL13(EmY)

YCAALESLINVSGCSAIEKTQRMLSGFCPHKVSAGQFSSLHVRDTKIEVAQFVKDLLLHLKKLF

REGRFNESKYGPPCPCPGGGSSGGGSGGGPREPQVYTLPPSQEEMTKNQVSLTCLVKGFY lgG4Hinge Linker lgG4-CH3

PSDIAVEWESNGQPENNYKTTPPVLDSDGSFFLYSRLTVDKSRWQEGNVFSCSVMHEALHN

HYTQKSLSLSLGKMALIVLGGVAGLLLFIGLGIFFKRGRKKLLYIFKQPFMRPVQTTQEEDGCS
CD4 tm 4-1BB cyto

CRFPEEEGGCELGGGRVKFSRSADAPAYQQGQNQLYNELNLGRREEYDVLDKRRGRDPE CD37

MGGKPRRKNPQEGLYNELQKDKMAEAYSEIGMKGERRRGKGHDGLYQGLSTATKDTYDA

### LHMQALPPR

GMCSFRa signal peptide IL13(EmY) IgG4Hinge Linker IgG4-Fc-CH3 CD4 transmembrane 4-1BB cyto (Gly)3 Zeta

IL13(EmY)-IgG4(L235E,N297Q)-CD8tm-41BB-Zeta

MLLLVTSLLLCELPHPAFLLIPGPVPPSTALR LIEELVNITQNQKAPLCNGSMVWSINLTAGM GMCSFRa signal peptide IL13(EmY)

YCAALESLINVSGCSAIEKTQRMLSGFCPHKVSAGQFSSLHVRDTKIEVAQFVKDLLLHLKKLF

REGRFNESKYGPPCP\*\*CPAPEFEGGPSVFLFPPKPKDTLMISRTPEVTCVVVDVSQEDPEVQF | IGgG4-Fc(SmP)

<u>NWYVDGVEVHNAKTKPREEQFQSTYRVVSVLTVLHQDWLNGKEYKCKVSNKGLPSSIEKTIS</u>

<u>KAKGQPREPQVYTLPPSQEEMTKNQVSLTCLVKGFYPSDIAVEWESNGQPENNYKTTPPVL</u>

DSDGSFFLYSRLTVDKSRWQEGNVFSCSVMHEALHNHYTQKSLSLSLGKIYIWAPLAGTCGV CD8 tm

LLLSLVIT<u>KRGRKKLLYIFKQPFMRPVQTTQEEDGCSCRFPEEEEGGCEL</u>GGG<u>RVKFSRSADAP</u> 4-1BB cyto CD3ζ

<u>AYQQGQNQLYNELNLGRREEYDVLDKRRGRDPEMGGKPRRKNPQEGLYNELQKDKMAEA</u>
YSEIGMKGERRRGKGHDGLYQGLSTATKDTYDALHMQALPPR

GMCSFRa signal peptide IL13(EmY) IgG4-Fc(SmP) CD8 transmembrane 4-1BB cyto (Gly)3 Zeta

IL13(EmY)-Linker-CD28tm-CD28gg-41BB-Zeta

MLLLVTSLLLCELPHPAFLLIPGPVPPSTALR LIEELVNITQNQKAPLCNGSMVWSINLTAGM GMCSFRa signal peptide IL13(EmY)

YCAALESLINVSGCSAIEKTQRMLSGFCPHKVSAGQFSSLHVRDTKIEVAQFVKDLLLHLKKLF

REGRFNGGGSSGGSGMFWVLVVVGGVLACYSLLVTVAFIIFWVRSKRSRGGHSDYMNM Linker CD28(M) tm CD28gg

<u>TPRRPGPTRKHYQPYAPPRDFAAYRS</u>GGG<u>KRGRKKLLYIFKQPFMRPVQTTQEEDGCSCRFP</u>
4-1BB cyto

EEEEGGCELGGGRVKFSRSADAPAYQQGQNQLYNELNLGRREEYDVLDKRRGRDPEMGGK CD3Z

PRRKNPQEGLYNELQKDKMAEAYSEIGMKGERRRGKGHDGLYQGLSTATKDTYDALHMQ

# **ALPPR**

GMCSFRa signal peptide IL13(EmY) Linker CD28(M) transmembrane CD28gg 4-1BB cyto (Gly)3 Zeta

IL13(EmY)-HL-CD28m-CD28gg-41BB-Zeta

MLLLVTSLLLCELPHPAFLLIPGPVPPSTALR LIEELVNITQNQKAPLCNGSMVWSINLTAGM GMCSFRa signal peptide IL13(EmY)

YCAALESLINVSGCSAIEKTQRMLSGFCPHKVSAGQFSSLHVRDTKIEVAQFVKDLLLHLKKLF

REGRFNESKYGPPCPCPGGGSSGGSGMFWVLVVVGGVLACYSLLVTVAFIIFWVRSKRS

IgG4Hinge Linker CD28(M) tm

CD28gg

RGGHSDYMNMTPRRPGPTRKHYQPYAPPRDFAAYRS<u>GGG</u>KRGRKKLLYIFKQPFMRPVQT 4-1BB cyto

TQEEDGCSCRFPEEEEGGCEL<u>GGG</u>RVKFSRSADAPAYQQGQNQLYNELNLGRREEYDVLDK CD3ζ

RRGRDPEMGGKPRRKNPQEGLYNELQKDKMAEAYSEIGMKGERRRGKGHDGLYQGLSTA
TKDTYDALHMQALPPR

GMCSFRa signal peptide IL13(EmY) IgG4Hinge Linker CD28(M) transmembrane CD28gg 4-1BB cyto (Gly)3 Zeta

# Figure 25

IL13(EmY)-IgG4(HL-CH3)-CD28tm-CD28gg-41BB-Zeta

MLLLVTSLLLCELPHPAFLLIPGPVPPSTALR LIEELVNITQNQKAPLCNGSMVWSINLTAGM GMCSFRa signal peptide IL13(EmY)

YCAALESLINVSGCSAIEKTQRMLSGFCPHKVSAGQFSSLHVRDTKIEVAQFVKDLLLHLKKLF

REGRFN<u>ESKYGPPCP</u>CPGGGSSGGGSG<u>GQPREPQVYTLPPSQEEMTKNQVSLTCLVKGFY</u>
IgG4Hinge Linker IgG4 CH3

PSDIAVEWESNGQPENNYKTTPPVLDSDGSFFLYSRLTVDKSRWQEGNVFSCSVMHEALHN

HYTQKSLSLSLGKMFWVLVVVGGVLACYSLLVTVAFIIFWVRSKRSRGGHSDYMNMTPRRPCD28(M) tm CD28gg

<u>GPTRKHYQPYAPPRDFAAYRS</u>GGG<u>KRGRKKLLYIFKQPFMRPVQTTQEEDGCSCRFPEEEEG</u> 4-1BB cyto

GCELGGGRVKFSRSADAPAYQQGQNQLYNELNLGRREEYDVLDKRRGRDPEMGGKPRRK
CD37

NPQEGLYNELQKDKMAEAYSEIGMKGERRRGKGHDGLYQGLSTATKDTYDALHMQALPP

<u>R</u>

GMCSFRa signal peptide IL13(EmY) IgG4Hinge Linker IgG4 CH3 CD28 transmembrane CD28gg 4-1BB cyto (Gly)3 Zeta

IL13(EmY)-IgG4(L235E,N297Q)-CD28tm-CD28gg-41BB-Zeta

MLLLVTSLLLCELPHPAFLLIPGPVPPSTALR LIEELVNITQNQKAPLCNGSMVWSINLTAGM GMCSFRa signal peptide IL13(EmY)

YCAALESLINVSGCSAIEKTQRMLSGFCPHKVSAGQFSSLHVRDTKIEVAQFVKDLLLHLKKLF

REGRFN<u>ESKYGPPCP</u>CPAPEFEGGPSVFLFPPKPKDTLMISRTPEVTCVVVDVSQEDPEVQF IgG4-Fc(L235E,N297Q)

NWYVDGVEVHNAKTKPREEQFQSTYRVVSVLTVLHQDWLNGKEYKCKVSNKGLPSSIEKTIS

KAKGQPREPQVYTLPPSQEEMTKNQVSLTCLVKGFYPSDIAVEWESNGQPENNYKTTPPVL

<u>DSDGSFFLYSRLTVDKSRWQEGNVFSCSVMHEALHNHYTQKSLSLSLGK</u>MFWVLVVVGGV CD28(M) tm

LACYSLLVTVAFIIFWV<u>RSKRSRGGHSDYMNMTPRRPGPTRKHYQPYAPPRDFAAYRS</u>GGG CD28gg

KRGRKKLLYIFKQPFMRPVQTTQEEDGCSCRFPEEEEGGCELGGGRVKFSRSADAPAYQQG
4-1BB cyto CD3ζ

<u>QNQLYNELNLGRREEYDVLDKRRGRDPEMGGKPRRKNPQEGLYNELQKDKMAEAYSEIG</u>

<u>MKGERRRGKGHDGLYQGLSTATKDTYDALHMQALPPR</u>

GMCSFRa signal peptide IL13(EmY) IgG4-Fc(L235E,N297Q) CD28 (M) transmembrane CD28gg (Gly)3 4-1BB cyto (Gly)3 Zeta

IL13(EmY)-CD8h3-CD8tm-41BB-Zeta

MLLLVTSLLLCELPHPAFLLIPGPVPPSTALR LIEELVNITQNQKAPLCNGSMVWSINLTAGM
GMCSFRa signal peptide IL13(EmY)

YCAALESLINVSGCSAIEKTQRMLSGFCPHKVSAGQFSSLHVRDTKIEVAQFVKDLLLHLKKLF
REGRFN<u>AKPTTTPAPRPPTPAPTIASQPLSLRPEACRPAAGGAVHTRGLDFACD</u>IYIWAPLAG
CD8hinge (48 aa) CD8tm

TCGVLLLSLVIT<u>GGG</u>KRGRKKLLYIFKQPFMRPVQTTQEEDGCSCRFPEEEEGGCEL<u>GGG</u>RVK

4-1BB cyto

CD37

FSRSADAPAYQQGQNQLYNELNLGRREEYDVLDKRRGRDPEMGGKPRRKNPQEGLYNELQ KDKMAEAYSEIGMKGERRRGKGHDGLYQGLSTATKDTYDALHMQALPPR

GMCSFRa signal peptide IL13(EmY) CD8hinge CD8 transmembrane (Gly)3 4-1BB cyto (Gly)3 Zeta



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Application Number EP 19 17 5730

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The present search report has been drawn up for all claims				
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	Place of search	Date of completion of the search		Examiner
	The Hague	13 November 2019	Koc	ols, Patrick
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